

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000012825

Entity Name: MIKE SOLUTIONS, INC.

FILED  
Mar 20, 2008  
Secretary of State

## Current Principal Place of Business:

6091 BOCA COLONY DRIVE  
APT. 1522  
BOCA RATON, FL 33433 US

## New Principal Place of Business:

## Current Mailing Address:

6091 BOCA COLONY DRIVE  
APT. 1522  
BOCA RATON, FL 33433 US

## New Mailing Address:

FEI Number: 20-8337673

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CANALES, MARLON  
6091 BOCA COLONY DRIVE  
APT. 1522  
BOCA RATON, FL 33433 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D/T ( ) Delete  
Name: ALVAREZ DE CANALES, MARIA  
Address: 6091 BOCA COLONY DRIVE APT 1522  
City-St-Zip: BOCA RATON, FL 33433 US

Title: P ( ) Delete  
Name: CANALES, MARLON  
Address: 6091 BOCA COLONY DRIVE APT 1522  
City-St-Zip: BOCA RATON, FL 33433 US

Title: S ( ) Delete  
Name: VERA, ADRIANA  
Address: 6091 BOCA COLONY DRIVE APT 1522  
City-St-Zip: BOCA RATON, FL 33433 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARLON CANALES

P

03/20/2008

Electronic Signature of Signing Officer or Director

Date