

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000004036

FILED
Jan 24, 2008
Secretary of State

Entity Name: INFOTECH SOFTWARE SOLUTIONS, INC.

Current Principal Place of Business:

1700 IOWA AVE., SUITE 100
RIVERSIDE, CA 92507

New Principal Place of Business:

330 ROBERTS STREET
SUITE 102
EAST HARTFORD, CT 06108

Current Mailing Address:

1700 IOWA AVE., SUITE 100
RIVERSIDE, CA 92507

New Mailing Address:

330 ROBERTS STREET
SUITE 102
EAST HARTFORD, CT 06108

FEI Number: 33-0867496

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: CD () Delete
Name: REDDY, B.V.R. MOHAN
Address: 1020 ROAD NO. 46 JUBILEE HILLS
City-St-Zip: HYDERABAD, INDIA, AP 500028

Title: D () Delete
Name: SUCHARITHA, B
Address: 1020 ROAD NO. 46 JUBILEE HILLS
City-St-Zip: HYDERABAD, INDIA, AP 500028

Title: PD (X) Delete
Name: KASETTY, RAJAN BABU
Address: 9024 KARA CIRCLE
City-St-Zip: RIVERSIDE, CA 92508

Title: D () Delete
Name: TILLEY, GREGORY B
Address: 43439 RIDGEVIEW PLACE
City-St-Zip: ASHBURN, VA 20147

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: JOSEPH, SOLOMON
Address: 321 WOODHAVEN ROAD
City-St-Zip: GLASTONBURY, CT 06033

Title: D (X) Change () Addition
Name: SHEKAR, NARAYAN
Address: 2828 HAYES ROAD , APT 1112
City-St-Zip: HOUSTON, TX 77082

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: SOLOMON JOSEPH

PD

01/24/2008

Electronic Signature of Signing Officer or Director

Date