

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000000693

Entity Name: LIONFISH SOLUTIONS, INC.

Current Principal Place of Business:

4154 JENNINGS BLVD.
PORT CHARLOTTE, FL 33981

Current Mailing Address:

4154 JENNINGS BLVD.
PORT CHARLOTTE, FL 33981 US

FEI Number: 46-1798157

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TOMAYKO, CHRISTOPHER
4154 JENNINGS BLVD.
PORT CHARLOTTE, FL 33981 US

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

Officer/Director Detail :

Title CEO
Name TOMAYKO, CHRISTOPHER
Address 4154 JENNINGS BLVD.
City-State-Zip: PORT CHARLOTTE FL 33981

Title COO
Name TOMAYKO, RITA K
Address 4154 JENNINGS BLVD.
City-State-Zip: PORT CHARLOTTE FL 33981

Title DIRECTOR
Name TOMAYKO, MAX A
Address 4154 JENNINGS BLVD.
City-State-Zip: PORT CHARLOTTE FL 33981

Title TREASURER
Name PAVESICH, DAVID
Address 4154 JENNINGS BLVD.
City-State-Zip: PORT CHARLOTTE FL 33981

Title CORRESPONDING SECRETARY
Name BURGHAM, BETH
Address 4154 JENNINGS BLVD.
City-State-Zip: PORT CHARLOTTE FL 33981

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHRISTOPHER TOMAYKO

CEO

04/21/2014

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date