2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2007
Secretary of State

DOCUMENT# F01000000400

Entity Name: SER SOLUTIONS, INC.

Current Principal Place of Business:

45925 HORSESHOE DRIVE
SUITE 150
DULLES, VA 20166

New Principal Place of Business:

Current Mailing Address:

45925 HORSESHOE DRIVE
SUITE 150
DULLES, VA 20166

New Mailing Address:

FEI Number: 06-1017599 **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:	CEO	( ) Delete
Name:	NAVARRO, JUAN A	
Address:	45925 HORSESHOE DRIVE, SUITE 150	
City-St-Zip:	DULLES, VA 20166	
Title:	PRES	( ) Delete
Name:	STONE, MARK	
Address:	10877 WILSHIRE BLVD. 18TH FLOOR	
City-St-Zip:	LOS ANGELES, CA 90024	
Title:	SECR	( ) Delete
Name:	BRADLEY, BRENT	
Address:	10877 WILSHIRE BLVD. 18TH FLOOR	
City-St-Zip:	LOS ANGELES, CA 90024	
Title:	DIR	( ) Delete
Name:	WEINGARTEN, IAN	
Address:	10877 WILSHIRE BLVD. 18TH FLOOR	
City-St-Zip:	LOS ANGELES, CA 90024	
Title:	DIR	( ) Delete
Name:	WYNTER, LINDSAY	
Address:	6260 LOOKOUT RD.	
City-St-Zip:	BOULDER, CO 80301	
Title:	DIR	( ) Delete
Name:	HIRANO, MIKE	
Address:	6260 LOOKOUT RD.	
City-St-Zip:	BOULDER, CO 80301	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	CEO	(X) Change ( ) Addition
Name:	TIM, MEYER	
Address:	10877 WILSHIRE BLVD. 18TH FLOOR	
City-St-Zip:	LOS ANGELES, CA 90024	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	CFO	(X) Change ( ) Addition
Name:	JAMIE, OLIVER	
Address:	45925 HORSESHOE DR., SUITE 150	
City-St-Zip:	DULLES, VA 20166	

I hereby certify that the information supplied with this filing does not qualify for the 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: TODD BEJIAN CNSL 01/29/2007

Electronic Signature of Signing Officer or Director — Date