2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000000185

Entity Name: BUSINESS VENTURES & SOLUTIONS INC.

FILED Sep 04, 2006 Secretary of State

| Current Principal Place of Business: | | | New Principal Pla | New Principal Place of Business: | |
|--|--|--|---|-----------------------------------|--|
| 6726 3RD S JUPITER, F | | | | | |
| Current Mailing Address: | | | New Mailing Add | New Mailing Address: | |
| 6726 3RD S JUPITER, F | | | | | |
| FEI Number: | 11-3634616 | FEI Number Applied For () | FEI Number Not Applicable() | Certificate of Status Desired (X) | |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent: | | | | | |
| THARPE, ANTHONY 6726 3RD ST. JUPITER, FL 33458 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: | | | | | |
| | Electro | nic Signature of Registered Agent | | Date | |
| Election Cam | | 93(2)(b), F.S., the corporation did not renge Trust Fund Contribution (). | • | NGES TO OFFICERS AND DIRECTORS: | |
| Title: | |) Delete | Title: | () Change () Addition | |
| Name: Address: City-St-Zip: | THARPE, ANT 6726 3RD ST JUPITER, FL | | Name: Address: City-St-Zip: | () Ghange () / Addition | |
| Title: Name: Address: City-St-Zip: | S (THARPE, SHA 6726 3RD ST JUPITER, FL |) Delete RIFA | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | T (THARPE, RAS 6726 3RD ST JUPITER, FL |) Delete HIDA | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | VD (BUCHANAN, J 113-04-203 S' ALBANS, NY | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | JONES, ROBE |) Delete ERT I DR., STE 124 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | D (THARPE, MEL 6726-3RD ST. JUPITER, FL | | Title: Name: Address: City-St-Zip: | () Change () Addition | |

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: ANTHONY THARPE PCD 09/04/2006