

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005757

Entity Name: RER SOLUTIONS, INC.

FILED
Feb 11, 2005
Secretary of State

Current Principal Place of Business:

950 HERNDON PARKWAY, SUITE 200
HERNDON, VA 20170

New Principal Place of Business:

Current Mailing Address:

950 HERNDON PARKWAY, SUITE 200
HERNDON, VA 20170

New Mailing Address:

FEI Number: 54-1497608

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KALLIVOKES, CHRISTOPHER
2843 S. BAYSHORE DRIVE
10F
MIAMI, FL 33133 US

Name and Address of New Registered Agent:

KALLIVOKES, CHRISTOPHER
3350 SW 27TH AVENUE
1001
MIAMI, FL 33133 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: CHRISTOPHER KALLIVOKAS

02/11/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: KALLIVOKAS, CHRISTOPHER
Address: 950 HERNDON PARKWAY, SUITE 200
City-St-Zip: HERNDON, VA 20170

Title: VCS () Delete
Name: LEVY, BRUCE M
Address: 950 HERNDON PARKWAY, SUITE 200
City-St-Zip: HERNDON, VA 20170

Title: V () Delete
Name: KALLIVOKAS, SCOTT A
Address: 950 HERNDON PARKWAY, SUITE 200
City-St-Zip: HERNDON, VA 20170

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 for the exemption stated in Section 119.07(3)(i), 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: CHRISTOPHER KALLIVOKAS

CP

02/11/2005

Electronic Signature of Signing Officer or Director

Date