

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005757

FILED  
Jan 05, 2006  
Secretary of State

Entity Name: RER SOLUTIONS, INC.

**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  
3350 SW 27TH AVENUE  
1001  
MIAMI, FL 33133 US

**Name and Address of New Registered Agent:**

KALLIVOKAS, CHRISTOPHER  
5500 COLLINS AVENUE  
401  
MIAMI BEACH, FL 33140 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      01/05/2006  
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: CEO (X) Change ( ) Addition  
Name: KALLIVOKAS, CHRISTOPHER  
Address: 950 HERNDON PARKWAY, SUITE 200  
City-St-Zip: HERNDON, VA 20170

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: KALLIVOKAS, SCOTT A  
Address: 950 HERNDON PARKWAY, SUITE 200  
City-St-Zip: HERNDON, VA 20170

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: CHRISTOPHER KALLIVOKAS      CEO      01/05/2006  
Electronic Signature of Signing Officer or Director      Date