

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000000459

Entity Name: 3D VIRTUAL SOLUTIONS CORP.

FILED  
Feb 14, 2008  
Secretary of State

## Current Principal Place of Business:

9200 BONITA BEACH ROAD  
210  
BONITA SPRINGS, FL 34135

## New Principal Place of Business:

## Current Mailing Address:

9200 BONITA BEACH ROAD  
210  
BONITA SPRINGS, FL 34135

## New Mailing Address:

FEI Number: 98-0415168

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: C ( ) Delete  
Name: BOUCHER, MARTIN  
Address: 2685 ROLLAND STREET #300  
City-St-Zip: STE-ADELE QC J8B 1C9 CANADA,

Title: DPS ( ) Delete  
Name: PILON, DANIEL  
Address: 2685 ROLLAND STREET #300  
City-St-Zip: STE-ADELE QC J8B 1C9 CANADA,

Title: DV (X) Delete  
Name: D'Aoust, CLIFFORD  
Address: 2685 ROLLAND STREET #300  
City-St-Zip: STE-ADELE QC J8B 1C9 CANADA,

## 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 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: CLAUDETTE BORDUAS

MRS

02/14/2008

Electronic Signature of Signing Officer or Director

Date