2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000005594

Entity Name: OCCUPATIONAL ENVIRONMENTAL HEALTH SOLUTIONS, INC.

FILED Jan 26, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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314 BRISTOL DRIVE 346 WILLIAMS LANE CHATHAM, IL 62629 CHATHAM, IL 62629

Current Mailing Address: New Mailing Address:

314 BRISTOL DRIVE 346 WILLIAMS LANE CHATHAM, IL 62629 CHATHAM, IL 62629

FEI Number: 37-1395539 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HELMICH, KEVIN M ESQUIRE 4481 LEGENDARY DRIVE SUITE 200 DESTIN, FL 32541 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CDP () Delete Title: (X) Change () Addition BARNES, JAMES D JR Name: Name: BARNES, JAMES D JR 346 WILLIAMS LANE 314 BRISTOL DRIVE Address: Address:

City-St-Zip: CHATHAM, IL 62629 City-St-Zip: CHATHAM, IL 62629

Title: DS Title: SD () Delete (X) Change () Addition Name: BARNES, JAMES D III Name: BARNES, JAMES D III 314 BRISTOL DRIVE 346 WILLIAMS LANE Address: Address: CHATHAM, IL 62629 City-St-Zip: City-St-Zip: CHATHAM, IL 62629

Title: Title: (X) Change () Addition () Delete TD

BARNES, BEVERLY K Name: BARNES, BEVERLY K Name: 314 BRISTOL DRIVE 346 WILLIAMS LANE Address: Address: City-St-Zip: CHATHAM, IL 62629 City-St-Zip: CHATHAM, IL 62629

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: JAMES D. BARNES, JR. CPD 01/26/2007