

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000003205

Entity Name: DFCI SOLUTIONS, INC.

FILED
Jan 13, 2009
Secretary of State

Current Principal Place of Business:

5401 S KIRKMAN RD SUITE 310
ORLANDO, FL 32819

New Principal Place of Business:

Current Mailing Address:

5401 S KIRKMAN RD SUITE 310
ORLANDO, FL 32819

New Mailing Address:

FEI Number: 11-0700610

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MESHOVER, STEPHEN
5401 S KIRKMAN RD SUITE 310
ORLANDO, FL 32819 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: P () Delete
Name: MESHOVER, STEPHEN
Address: 8701 KENMARE COVE
City-St-Zip: ORLANDO, FL 32836

Title: VPS () Delete
Name: MARIE, OLIVIA
Address: 12 PRINCESS GATE
City-St-Zip: OAKDALE, NY 11769

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MESHOVER, STEPHEN
Address: 8701 KENMARE COVE
City-St-Zip: ORLANDO, FL 32836

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: ANN MARIE WEIS

CONT

01/13/2009

Electronic Signature of Signing Officer or Director

Date