

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000004229

FILED
Feb 09, 2009
Secretary of State

Entity Name: CONSILIUM SOLUTIONS INC.

Current Principal Place of Business:

7929 WEST DR., #1003
N. BAY VILLAGE, FL 33141

New Principal Place of Business:

Current Mailing Address:

7929 WEST DR., #1003
N. BAY VILLAGE, FL 33141

New Mailing Address:

FEI Number: 20-8720225

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KASTNER-FIORETH, CYNTHIA
7929 WEST DR., #1003
N. BAY VILLAGE, FL 33141 US

Name and Address of New Registered Agent:

KASTNER-FIORETTI, CYNTHIA
7929 WEST DR., #1003
N. BAY VILLAGE, FL 33141 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: CYNTHIA KASTNER-FIORETTI

02/09/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDT () Delete
Name: FIORETTI, CHRISTOPHER P
Address: 7929 WEST DR., #1003
City-St-Zip: N. BAY VILLAGE, FL 33141

Title: VS () Delete
Name: KASTNER-FIORETTI, CYNTHIA
Address: 7929 WEST DR., #1003
City-St-Zip: N. BAY VILLAGE, FL 33141

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: KASTNER-FIORETTI, CYNTHIA
Address: 7929 WEST DR., #1003
City-St-Zip: N. BAY VILLAGE, FL 33141

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: CYNTHIA KASTNER-FIORETTI

VP

02/09/2009

Electronic Signature of Signing Officer or Director

Date