2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000005642

Entity Name: CONTAINMENT SOLUTIONS, INC.

FILED Feb 08, 2005 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
2400 AUGUSTA DR #340 HOUSTON, TX 77057					
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
2400 AUGUSTA DR #340 HOUSTON, TX 77057					
FEI Number: 7	76-0454639	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:					
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
	PD () FINDLEY, R. CL 2 CLOVERGATE THE WOODLAN	CIR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () YOUNG, PETER 603 HIGH STRE WESTWOOD, M	ET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Address:	TD () MAYNARD, TIMO 24155 S. 98TH F TULSA, OK 741	PLACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () SMITH, CATHY I 1079 OLD STON PARK CITY, UT	IE HOUSE WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ASD () BENNETT, ROB 802 KNOX HOUSTON, TX		Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TIMOTHY D. MAYNARD TD 02/08/2005