

2001 UNIFORM BUSINESS REPORT (UBR)**FILED**
Jan 19, 2001 8:00 am
Secretary of State

01-19-2001 90049 002 ***150.00

031108

DOCUMENT # F98000000120

1. Entity Name

TRAINING SOLUTIONS, INC.**STREET**

Principal Place of Business

Mailing Address

~~6498 NW 88TH WAY~~ Enclave Way
BOCA RATON FL 33496~~6498 NW 88TH WAY~~ Enclave Way
BOCA RATON FL 33496**700049**2. Principal Place of Business
6498 Enclave Way3. Mailing Address
6498 Enclave Way

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
36-3092873

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GENENDER, RICHARD M
~~**6498 N.W. 88TH WAY**~~ Enclave Way
BOCA RATON FL 33496

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP		TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
	PD	GENENDER, CARLA E	6498 N.W. 88TH WAY Enclave Way	<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
		BOCA RATON FL 33496							
	S	GENENDER, RICHARD M	6498 N.W. 88TH WAY Enclave Way	<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
		BOCA RATON FL 33496							
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Richard M. Genender, Corp. Secretary 01/05/01 561-912-9161

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)