## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F98000006139

Address:

City-St-Zip:

Entity Name: SOLUTIONS4SURE.COM, INC.

FILED Apr 09, 2008 Secretary of State

Current P	rincipal Plac	e of Business:	New Princ	New Principal Place of Business:		
	GERMANTO BEACH, FL 33					
Current M	lailing Addre	ss:	New Maili	New Mailing Address:		
P.O. BOX 811749 BOCA RATON, FL 33481				P.O. BOX 5029 BOCA RATON, FL 33431		
FEI Number	: 06-1526627	FEI Number Applied For ( )	FEI Number Not App	licable ( )	Certificate of Status Desired ( )	
Name and	d Address of	Current Registered Agent:	Name and	Name and Address of New Registered Agent:		
	ATE CREATION OSPERITY FA	DNS NETWORK, INC. RMS ROAD				
	ACH GARDEN	IS, FL 33410 US				
	e named entity e of Florida.	submits this statement for the	purpose of changing i	ts registered of	fice or registered agent, or both,	
SIGNATU	RE:					
	Electro	nic Signature of Registered Ag	ent		Date	
Election Ca	mpaign Financir	ng Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	LEUCHTEFEL	RMANTOWN ROAD	Title: Name: Address: City-St-Zip:	( )	Change ()Addition	
Title: Name: Address: City-St-Zip:	FANNIN, DAVI	RMANTOWN ROAD	Title: Name: Address: City-St-Zip:	( )	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	JAMES, GRAD	RMANTOWN ROAD	Title: Name: Address: City-St-Zip:	( )	Change ( ) Addition	
Title: Name:	(	) Delete	Title: Name:	VP () ZUCKERMAN, A	Change (X) Addition NNE	

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.

Address:

City-St-Zip:

SIGNATURE: PHYLLIS COSGRAVE AGT 04/09/2008

2200 OLD GERMANTOWN ROAD

DELRAY BEACH, FL 33445