

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000006139

Entity Name: SOLUTIONS4SURE.COM, INC.

FILED  
Apr 19, 2011  
Secretary of State

## Current Principal Place of Business:

6 CAMBRIDGE DRIVE  
TRUMBULL, CT 06611

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 5029  
BOCA RATON, FL 33431

## New Mailing Address:

FEI Number: 06-1526627

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.  
11380 PROSPERITY FARMS ROAD  
#221E  
PALM BEACH GARDENS, FL 33410 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

## OFFICERS AND DIRECTORS:

Title: P  
Name: LEUCHTEFELD, MONICA  
Address: 6 CAMBRIDGE DRIVE  
City-St-Zip: TRUMBULL, CT 06611

Title: VCFO  
Name: NEWMAN, MICHAEL D  
Address: 6 CAMBRIDGE DRIVE  
City-St-Zip: TRUMBULL, CT 06611

Title: V  
Name: FILON, MICHAEL  
Address: 6 CAMBRIDGE DRIVE  
City-St-Zip: TRUMBULL, CT 06611

Title: V  
Name: SIVAKANTHAN, SELLATHURAI  
Address: 6 CAMBRIDGE DRIVE  
City-St-Zip: TRUMBULL, CT 06611

Title: DS  
Name: GARCIA C., ELISA D  
Address: 6 CAMBRIDGE DRIVE  
City-St-Zip: TRUMBULL, CT 06611

Title: D  
Name: NEWMAN, MICHAEL D  
Address: 6 CAMBRIDGE DRIVE  
City-St-Zip: TRUMBULL, CT 06611

I hereby 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 all other like empowered.

SIGNATURE: VALERIE HAWK-DONOHUE, ATTY IN FACT

P

04/19/2011

Electronic Signature of Signing Officer or Director

Date