

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K85422

FILED
Jan 25, 2005
Secretary of State

Entity Name: REMARKABLE SOLUTIONS, INC.

Current Principal Place of Business:

14553 AUBREY AVENUE
BROOKSVILLE, FL 34610

New Principal Place of Business:

14553 AUBREY AVENUE
SPRING HILL, FL 34610

Current Mailing Address:

14553 AUBREY AVENUE
BROOKSVILLE, FL 34610

New Mailing Address:

14553 AUBREY AVENUE
SPRING HILL, FL 34610

FEI Number: 59-2952735

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIKULE, CARL
14553 AUBREY AVENUE
BROOKSVILLE, FL 34610 US

Name and Address of New Registered Agent:

MIKULE, CARL
14553 AUBREY AVENUE
SPRING HILL, FL 34610 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:

01/25/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MIKULE, CARL,
Address: 14553 AUBREY AVENUE
City-St-Zip: BROOKSVILLE, FL 34610

Title: D () Delete
Name: MIKULE, MRS. CARL,
Address: 14553 AUBREY AVENUE
City-St-Zip: BROOKSVILLE, FL 34610

Title: D () Delete
Name: DUNLAP, WILLIAM
Address: 15801BROOKRIDGE BLVD.
City-St-Zip: BROOKSVILLE, FL 34613

Title: D () Delete
Name: DUNLAP, MRS. WILLIAM,
Address: 15801BROOKRIDGE BLVD.
City-St-Zip: BROOKSVILLE, FL 34613

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MIKULE, CARL,
Address: 14553 AUBREY AVENUE
City-St-Zip: SPRING HILL, FL 34610

Title: D (X) Change () Addition
Name: MIKULE, MRS. CARL,
Address: 14553 AUBREY AVENUE
City-St-Zip: SPRING HILL, FL 34610

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

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

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: CARL MIKULE

PD

01/25/2005

Electronic Signature of Signing Officer or Director

Date