2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000003644

Entity Name: FRANKLIN'S BUSINESS SOLUTIONS, INC.

FILED Apr 29, 2003 Secretary of State

Current Principal Place of Business:

5304 ORANGE AVE
SEFFNER, FL 33584

New Principal Place of Business:

Current Mailing Address: New Mailing Address:

5304 ORANGE AVE SEFFNER, FL 33584

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FRANKLIN, SONIA 5304 ORANGE AVE SEFFNER, FL 33584

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete FRANKLIN, REGINALD FRANKLIN, SR, REGINALD Name: Name: 5304 ORANGE AVE Address: 5304 ORANGE AVE Address: City-St-Zip: SEFFNER, FL 33584 City-St-Zip: SEFFNER, FL 33584 Title: () Delete Title: () Change () Addition FRANKLIN, SONIA Name: Name:

 Name:
 FRANKLIN, SONIA
 Name:

 Address:
 5304 ORANGE AVE
 Address:

 City-St-Zip:
 SEFFNER, FL 33584
 City-St-Zip:

Title: D () Delete Title: D (X) Change () Addition Name: JENKINS, DAISY Name: HALL, CLAUDE

 Name:
 <th

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 UPSHAW, COLLEEN

 Address:
 Address:
 8309 IBERIA PLACE

 City-St-Zip:
 City-St-Zip:
 TAMPA, FL 33617

Title: () Delete Title: D () Change (X) Addition Name: RANKLIN, II, REGINALD

 Address:
 Address:
 503 PALM BEACH ST. APT 333

 City-St-Zip:
 City-St-Zip:
 TALLAHASSEE, FL 32310

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 HALL, JACQUELYN

 Address:
 Address:
 1411 CLOVERFIELD DR

 City-St-Zip:
 City-St-Zip:
 BRANDON, FL 33511

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: REGINALD FRANKLIN,SR D 04/29/2003