

**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jul 05, 2005  
Secretary of State**

DOCUMENT# N04000001964

Entity Name: R SOLUTION - 2004, INC.

**Current Principal Place of Business:**

P. O. BOX 902060  
HOMESTEAD, FL 33090

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 902060  
HOMESTEAD, FL 33090

**New Mailing Address:**

FEI Number: 84-1635365      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

JEAN/LOUIS, RITHO SR.  
38124 S.W. 195 PL.  
FLORIDA CITY, FL 33034      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      ( ) Delete  
Name: JEAN/LOUIS, RITHO SR.  
Address: P. O. BOX 902060  
City-St-Zip: HOMESTEAD, FL 33090

Title: V      ( ) Delete  
Name: WILLIAMS, FREDDIE  
Address: 30632 S.W. 152 PL.  
City-St-Zip: HOMESTEAD, FL 33033

Title: S      ( ) Delete  
Name: WILLIAMS, ISHMEL H  
Address: 10581 S.W. 141 DR.  
City-St-Zip: MIAMI, FL 33176

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

SIGNATURE: RITHO JEAN LOUIS

P

07/05/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date