

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000099709

FILED
Apr 09, 2004
Secretary of State

Entity Name: NEW PERSPECTIVE SOLUTIONS INCORPORATED

Current Principal Place of Business:

6612 SEABIRD WAY
APOLLO BEACH, FL 33572

New Principal Place of Business:

1106 PASS A GRILLE WAY
ST. PETE BEACH, FL 33706

Current Mailing Address:

6612 SEABIRD WAY
APOLLO BEACH, FL 33572

New Mailing Address:

1106 PASS A GRILLE WAY
ST. PETE BEACH, FL 33706

FEI Number: 59-3574458

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CALLAHAN, THOMAS
6612 SEABIRD WAY
APOLLO BEACH, FL 33572

Name and Address of New Registered Agent:

CALLAHAN, THOMAS
1106 PASS A GRILLE WAY
ST. PETE BEACH, FL 33706

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:

04/09/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: CALLAHAN, THOMAS
Address: 6612 SEABIRD WAY
City-St-Zip: APOLLO BEACH, FL 33572 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: CALLAHAN, THOMAS
Address: 1106 PASS A GRILLE WAY
City-St-Zip: ST PETE BEACH, FL 33706 US

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: THOMAS CALLAHAN

CEO

04/09/2004

Electronic Signature of Signing Officer or Director

Date