2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000113457

FILED Apr 21, 2004 Secretary of State

Entity Name: PJP SOLUTIONS, INC.						
Current Principal Place of Business:			New Principal Place of Business:			
880 MANC OVIEDO, F	HESTER AVE L 32765					
Current Mailing Address:			New Mailir	ng Address:		
880 MANC OVIEDO, F	HESTER AVE L 32765					
FEI Number:	59-3684555	FEI Number Applied For () FE	l Number Not Appli	cable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
NEWMAN, JILL 2790 N FEDERAL HWY, SUITE 201 BOCA RATON, FL 33431 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.					
SIGNATUR		ic Signature of Registered Agent		Data		
Election Can		Trust Fund Contribution ().		Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PVS () JEAN-PIERRE, 4048 IVEYGLEI ORLANDO, FL	N AVE	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	M () ALCINDOR, MA 11211 S. MILITA BOYNTON BEA	ARY TRAIL	Title: Name: Address: City-St-Zip:	HR (X) Change () Addition ALCINDOR, MARCELIN 16527 75TH PLACE N LOXAHATCHEE, FL 33470		
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	CFO () Change (X) Addition FRAY, MARIE 606 HIBISCUS AVENUE LEHIGH ACRES, FL 33936		
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	M () Change (X) Addition THEVENIN, HARRY 617 TERRACE DRIVE OVIEDO, FL 32765		

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: PASCALE JEAN-PIERRE **PVS** 04/21/2004