

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000113457

Entity Name: PJP SOLUTIONS, INC.

FILED
Apr 30, 2007
Secretary of State

Current Principal Place of Business:

880 MANCHESTER AVE
OVIEDO, FL 32765

New Principal Place of Business:

Current Mailing Address:

880 MANCHESTER AVE
OVIEDO, FL 32765

New Mailing Address:

FEI Number: 59-3684555

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THEVENIN, HARRY
677 TERRACE DRIVE
OVIEDO, FL 32765 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVS () Delete
Name: JEAN-PIERRE, PASCALE
Address: 880 MANCHESTER AVENUE
City-St-Zip: OVIEDO, FL 32765

Title: HR () Delete
Name: ALCINDOR, MARCELIN
Address: 880 MANCHESTER AVENUE
City-St-Zip: OVIEDO, FL 32765

Title: CFO () Delete
Name: FRAY, MARIE
Address: 880 MANCHESTER AVENUE
City-St-Zip: OVIEDO, FL 32765

Title: M () Delete
Name: THEVENIN, HARRY
Address: 677 TERRACE DRIVE
City-St-Zip: OVIEDO, FL 32765

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PVS (X) Change () Addition
Name: ALCINDOR, MARCELIN
Address: 880 MANCHESTER AVENUE
City-St-Zip: OVIEDO, FL 32765

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 exemption stated in Chapter 119, 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: MARCELIN ALCINDOR

PVS

04/30/2007

Electronic Signature of Signing Officer or Director

Date