

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000001485

FILED
Feb 19, 2007
Secretary of State

Entity Name: NORTH AMERICAN OFFICE SOLUTIONS, INC.

Current Principal Place of Business:

7111 GRAND NATIONAL DR.
STE 106
ORLANDO, FL 32819

New Principal Place of Business:

6314 KINGSPONTE PKWY
STE 7
ORLANDO, FL 32819

Current Mailing Address:

7111 GRAND NATIONAL DR.
STE 106
ORLANDO, FL 32819

New Mailing Address:

6314 KINGSPONTE PKWY
STE 7
ORLANDO, FL 32819

FEI Number: 59-3694573

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLAPP, STEVE W
8011 LANGHURST CT.
ORLANDO, FL 32835 US

Name and Address of New Registered Agent:

CLAPP, STEVE W
6314 KINGSPONTE PKWY
STE 7
ORLANDO, FL 32819 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.

SIGNATURE:

02/19/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: CLAPP, STEVE W
Address: 7111 GRAND NATIONAL DR.
City-St-Zip: ORLANDO, FL 32819

Title: DS () Delete
Name: MUEHLSTEIN, KYLE
Address: 7111 GRAND NATIONAL DR.
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: CLAPP, STEVE W
Address: 6314 KINGSPONTE PKWY
City-St-Zip: ORLANDO, FL 32819

Title: DS (X) Change () Addition
Name: MUEHLSTEIN, KYLE
Address: 6314 KINGSPONTE PKWY
City-St-Zip: ORLANDO, FL 32819

I hereby certify that the information supplied with this filing does not qualify for the 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: STEVE W. CLAPP

DP

02/19/2007

Electronic Signature of Signing Officer or Director

Date