2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 29, 2005 08:00 AM **DOCUMENT # P01000011641 Secretary of State** SOLUTIONS EDUCATIONAL AND PSYCHOLOGICAL SERVICES, INC. Principal Place of Business Mailing Address 548 CAMBRIDGE DR. 548 CAMBRIDGE DR. WESTON, FL 33326 WESTON, FL 33326 CR2E034 (10/03) 04242005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1095180 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent EISLER, MICHAEL J DO NOT WRITE STRAUS & EISLER, P.A 1290 WESTON RD., STE. 314 IN THIS SPACE WESTON, FL 33326 5. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. DATE + Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing U00000343136 FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 04/29/05-80084-005 150.00 OFFICERS AND DIRECTORS 10. TITLE DOLNICK, PAUL NAME 548 CAMBRIDGE DR. STREET ADDRESS CITY-SY-ZIP WESTON, FL 33326 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR RUNTED HAVE OF SIGNING OFFICER OR DIRECTOR

I hereby certify that the information supplied with this filing does not qualify 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 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED