

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000029962

FILED
Apr 30, 2007
Secretary of State

Entity Name: MIS SOLUTIONS INTERNATIONAL, INC.

Current Principal Place of Business:

280 WEKIVA SPRINGS RD
STE 201
LONGWOOD, FL 32779

New Principal Place of Business:

280 WEKIVA SPRINGS RD
STE 2030
LONGWOOD, FL 32779

Current Mailing Address:

280 WEKIVA SPRINGS RD
STE 201
LONGWOOD, FL 32779

New Mailing Address:

280 WEKIVA SPRINGS RD
STE 2030
LONGWOOD, FL 32779

FEI Number: 59-3711288

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JABLON, MARC
280 WEKIVA SPRINGS RD
STE 201
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

JABLON, MARC
280 WEKIVA SPRINGS RD
STE 2030
LONGWOOD, FL 32779 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:

04/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RUSSELL, JOSEPH
Address: 7045 HUNDRED ACRE DR
City-St-Zip: COCOA, FL 32927

Title: VPD () Delete
Name: FYFE, TERRY
Address: 2937 MONACO CT
City-St-Zip: ORLANDO, FL 32806

Title: D () Delete
Name: JABLON, KEITH
Address: 329 BLUE STONE CIR
City-St-Zip: WINTER GARDEN, FL 34787

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: TERRY FYFE

VPD

04/30/2007

Electronic Signature of Signing Officer or Director

Date