

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000035686

FILED
Jun 08, 2004
Secretary of State

Entity Name: PUBLIC SECTOR SOLUTIONS, INC.

Current Principal Place of Business:

P.O. BOX 220626
W PALM BEACH, FL 33417

New Principal Place of Business:

11380 PROSPERITY FARMS RD
SUITE 101, C/O ANDREW PASTOR
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

P.O. BOX 220626
W PALM BEACH, FL 33417

New Mailing Address:

11380 PROSPERITY FARMS RD
SUITE 101, C/O ANDREW PASTOR
PALM BEACH GARDENS, FL 33410

FEI Number: 65-1110530

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PASTOR, ANDREW E ESQ
11380 PROSPERITY FARMS RD, STE 101
PALM BEACH GARDENS, FL 33410 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: P () Delete
Name: SOKOL, MARSHALL D
Address: P.O. BOX 220626
City-St-Zip: W PALM BEACH, FL 33417

Title: VST () Delete
Name: SOKOL, JOAN B
Address: P.O. BOX 220626
City-St-Zip: W PALM BEACH, FL 33417

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SOKOL, MARSHALL D
Address: 2121 K ST, NW, SUITE 800
City-St-Zip: WASHINGTON, DC 20037

Title: VST (X) Change () Addition
Name: SOKOL, JOAN B
Address: 2121 K ST, NW, SUITE 800
City-St-Zip: WASHINGTON, DC 20037

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: MARSHALL D. SOKOL

P

06/08/2004

Electronic Signature of Signing Officer or Director

_____ Date