2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000113051

Entity Name: INK SOLUTION OF FLORIDA, INC.

FILED Mar 24, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6214 N. FEDERAL HIGHWAY 2137 NW 22ND STREET FORT LAUDERDALE, FL 33308 POMPANO BEACH, FL 33069

Current Mailing Address: New Mailing Address:

6214 N. FEDERAL HIGHWAY 2137 NW 22ND STREET FORT LAUDERDALE, FL 33308 POMPANO BEACH, FL 33069

FEI Number: 65-1157248 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CAVALCANTI, DANIEL
6214 N. FEDERAL HIGHWAY
FORT LAUDERDALE, FL 33308 US
CAVALCANTI, DANIEL
2137 NW 22ND STREET
POMPANO BEACH, FL 33069 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: 03/24/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition CAVALCANTI, DANIEL CAVALCANTI, DANIEL Name: Name: 6214 N. FEDERAL HIGHWAY 2137 NW 22ND STREET Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33308 City-St-Zip: POAMPANO BEACH, FL 33069

Title: D () Delete Title: D (X) Change () Addition Name: PEDROSA, LUCIANO Name: PEDROSA, LUCIANO

Address: 6214 N. FEDERAL HIGHWAY Address: 2137 NW 22ND STREET
City-St-Zip: FORT LAUDERDALE, FL 33308 City-St-Zip: POMPANO BEACH, FL 33069

 Title:
 D
 () Delete
 Title:
 D
 (X) Change () Addition

 Name:
 CAVALCANTI, TIAGO
 Name:
 CAVALCANTI, TIAGO

 Address:
 6214 N. FEDERAL HIGHWAY
 Address:
 2137 22ND STREET

 City-St-Zip:
 FORT LAUDERDALE, FL 33308
 City-St-Zip:
 POMPANO BEACH, FL 33069

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: TIAGO CAVALCANTI D 03/24/2005