

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000114866

**FILED**  
**Apr 18, 2007**  
**Secretary of State**

**Entity Name:** ENGINEERED TECHNOLOGICAL SOLUTIONS, INC.

**Current Principal Place of Business:**

18547 SW 104TH AVE  
MIAMI, FL 33157

**New Principal Place of Business:**

25405 SW 134TH PL  
MIAMI, FL 33032

**Current Mailing Address:**

P.O. BOX 970149  
MIAMI, FL 33197

**New Mailing Address:**

**FEI Number:** 65-1157507

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ALICEA, JOHN  
25405 SW 134TH AVE  
MIAMI, FL 33032 US

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

ALICEA, JOHN  
25405 SW 134TH PL  
MIAMI, FL 33032 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/18/2007

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: ALICEA, JOHN  
Address: 25405 SW 134TH AVE  
City-St-Zip: MIAMI, FL 33032

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: ALICEA, JOHN  
Address: 25405 SW 134TH PL  
City-St-Zip: MIAMI, FL 33032

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: JOHN ALICEA

D

04/18/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date