2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

FILED Sep 01, 2005 08:00 AM Secretary of State DOCUMENT # P01000117625 CHOICES & SOLUTIONS, INC. Mailing Address Principal Place of Business 4949 CROSS POINT DRIVE 4949 CROSS POINT DRIVE OLDSMAR, FL 34677 OLDSMAR, FL 34677 08302005 CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 30-0014885 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Foe Required 6. Name and Address of Current Registered Agent COURIS, DIANNE DO NOT WRITE 4949 CROSS POINT DRIVE OLDSMAR, FL 34677 IN THIS SPACE 8. 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. \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$550.00 Trust Fund Contribution. Added to Fees Due by September 7, 2005 OFFICERS AND DIRECTORS 10. D TITLE COURIS, DIANNE NAME U00000377545 4949 CROSS POINT DRIVE STREET ADDRESS 03/01/05-80003-017 550.00 OLDSMAR, FL 34677 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. 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 or 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 united like empowered.