

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000121716

FILED  
Apr 27, 2007  
Secretary of State

Entity Name: ROCK SOLID FOUNDATIONS, INC.

## Current Principal Place of Business:

2600 HAWK ROOST CT.  
HOLIDAY, FL 34691 US

## New Principal Place of Business:

5738 MISSOURI AVENUE  
NEW PORT RICHEY, FL 34652 US

## Current Mailing Address:

2600 HAWK ROOST CT.  
HOLIDAY, FL 34691 US

## New Mailing Address:

5738 MISSOURI AVENUE  
NEW PORT RICHEY, FL 34652 US

FEI Number: 01-0577537

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PETITTA, CHRISTOPHER  
2623 GRAND BLVD  
STE 116  
HOLIDAY, FL 34690 US

## Name and Address of New Registered Agent:

WALLACE, ROBERT  
5738 MISSOURI AVENUE  
NEW PORT RICHEY, FL 34652 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: ROBERT WALLACE

04/27/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: WALLACE, ROBERT  
Address: PO BOX 885  
City-St-Zip: ELFERS, FL 34680

Title: V (X) Delete  
Name: PETITTA, CHRISTOPHER W  
Address: PO BOX 885  
City-St-Zip: ELFERS, FL 34680

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: WALLACE, ROBERT  
Address: 5738 MISSOURI AVENUE  
City-St-Zip: NEW PORT RICHEY, FL 34652

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: ROBERT WALLACE

P

04/27/2007

Electronic Signature of Signing Officer or Director

Date