2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 03, 2007
Secretary of State

DOCUMENT# P02000002914

Entity Name: D & L BUSINESS SOLUTIONS, INC.

Current Principal Place of Business:

3880 N. HWY A1A
UNIT 803
FORT PIERCE, FL 34949

New Principal Place of Business:

Current Mailing Address:

3880 N. HWY A1A
UNIT 803
FORT PIERCE, FL 34949

New Mailing Address:

FEI Number: 26-0013366 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FILINGS, INC.
3732 N.W. 16TH STREET
FT. LAUDERDALE, FL 333114132 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: PD ( ) Delete
Name: TEGREENE, DAVID G
Address: 3880 N. HWY A1A UNIT 803
City-St-Zip: FORT PIERCE, FL 34949

Title: VP ( ) Delete
Name: TEGREENE, LAURIE C
Address: 3880 N. HWY A1A UNIT 803
City-St-Zip: FORT PIERCE, FL 34949

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: LAURIE C. TEGREENE VP 01/03/2007

Electronic Signature of Signing Officer or Director — Date