2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 02, 2006
Secretary of State

DOCUMENT# P02000009221

Entity Name: AMERICAN SOLUTIONS AND SERVICES, INC.

Current Principal Place of Business:

3501 WEST VINE STREET
SUITE 329
KISSIMMEE, FL 34741

New Principal Place of Business:

3501 WEST VINE STREET
SUITE 336
KISSIMMEE, FL 34741

Current Mailing Address:

3501 WEST VINE STREET
SUITE 329
KISSIMMEE, FL 34741

New Mailing Address:

3501 WEST VINE STREET
SUITE 336
KISSIMMEE, FL 34741

FEI Number: 01-0603055 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LINDO, NINOSKA C
3501 WEST VINE STREET
SUITE 329
KISSIMMEE, FL 34741 US

Name and Address of New Registered Agent:

LINDO, NINOSKA C
3501 WEST VINE STREET
SUITE 336
KISSIMMEE, FL 34741 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: NINOSKA C. LINDO 06/02/2006
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SIFONTES, NICOLAS R
Address: 460 HOLBORN LOOP
City-St-Zip: DAVENPORT, FL 33897

Title: VSTD ( ) Delete
Name: LINDO, NINOSKA C
Address: 460 HOLBORN LOOP
City-St-Zip: DAVENPORT, FL 33897

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SIFONTES, NICOLAS R
Address: 460 HOLBORN LOOP
City-St-Zip: DAVENPORT, FL 33897

Title: VP (X) Change ( ) Addition
Name: LINDO, NINOSKA C
Address: 460 HOLBORN LOOP
City-St-Zip: DAVENPORT, FL 33897

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: NINOSKA C. LINDO VP 06/02/2006
Electronic Signature of Signing Officer or Director Date