2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 29, 2003
Secretary of State

DOCUMENT# P02000024606

Entity Name: SOLUTIONS OF AMERICA, INC.

Current Principal Place of Business:

285 RIPPLING LANE
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

HANS KENNON, ESQUIRE
PO BOX 4979
ORLANDO, FL 328024979

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KENNON, HANS ESQUIRE
20 N ORANGE AVE, 10TH FLOOR
ORLANDO, FL 32801 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: DPT ( ) Delete
Name: LEEPER, PAULA
Address: 285 RIPPLING LANE
City-St-Zip: WINTER PARK, FL 32789

Title: DVS ( ) Delete
Name: BRAUN, STEVEN
Address: 285 RIPPLING LANE
City-St-Zip: WINTER PARK, FL 32789

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 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 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: PAULA LEEPER DPT 04/29/2003
Electronic Signature of Signing Officer or Director — Date