

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000028203

FILED
Apr 14, 2009
Secretary of State

Entity Name: PROSOLUTIONS INTERNATIONAL, INC.

Current Principal Place of Business:

1010 SYMPHONY ISLES BLVD
APOLLO BEACH, FL 335722700

New Principal Place of Business:

Current Mailing Address:

1010 SYMPHONY ISLES BLVD
APOLLO BEACH, FL 335722700

New Mailing Address:

FEI Number: 04-3624339

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALAN S CHRISTNER JR PA
350 GULF BLVD
INDIAN ROCKS BEACH, FL 33785 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: S () Delete
Name: DUKAT, CAMILLE
Address: 9302 WELLINGTON PARK CIRCLE
City-St-Zip: TAMPA, FL 33647

Title: T () Delete
Name: KRISTENSEN, M
Address: 1010 SYMPHONY ISLES BLVD
City-St-Zip: APOLLO BEACH, FL 33572

Title: P () Delete
Name: WASIELEWSKI, MICHAEL
Address: 1010 SYMPHONY ISLES BLVD
City-St-Zip: APOLLO BEACH, FL 33572

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: MICHAEL C. WASIELEWSKI

VP

04/14/2009

Electronic Signature of Signing Officer or Director

Date