

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000041905

FILED
Sep 07, 2005
Secretary of State

Entity Name: BAY AREA BUSINESS SOLUTIONS INC.

Current Principal Place of Business:

4601 W KENNEDY BLVD
SUITE 223-B
TAMPA, FL 33609

New Principal Place of Business:

Current Mailing Address:

1712 LARABIZ COURT
BRANDON, FL 33511

New Mailing Address:

FEI Number: 56-2330083

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WRIGHT, ADRIAN D
901 WEST PLATT STREET
TAMPA, FL 33606 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

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: PT () Delete
Name: MITCHELL, MELANIE
Address: 1712 LARABIE COURT
City-St-Zip: BRANDON, FL 33511

Title: S () Delete
Name: PEELE, CHARMELE
Address: 5306 ALBANY RD
City-St-Zip: FT MYERS, FL

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: MELANIE MITCHELL

PRES

09/07/2005

Electronic Signature of Signing Officer or Director

Date