

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000045623

Entity Name: E-CHEM SOLUTIONS, INC.

FILED  
Apr 30, 2007  
Secretary of State

**Current Principal Place of Business:**

3740 KORI ROAD  
JACKSONVILLE, FL 32257

**Current Mailing Address:**

3740 KORI ROAD  
JACKSONVILLE, FL 32257

**New Principal Place of Business:**

5783 MINING TERRACE  
6  
JACKSONVILLE, FL 32257

**New Mailing Address:**

5783 MINING TERRACE  
6  
JACKSONVILLE, FL 32257

FEI Number: 04-3654732

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HASSAN, ESA  
3740 KORI ROAD  
JACKSONVILLE, FL 32257 US

**Name and Address of New Registered Agent:**

HASSAN, ESA  
5783 MINING TERRACE  
6  
JACKSONVILLE, FL 32257 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/30/2007

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: HASSAN, ESA  
Address: 3740 KORI ROAD  
City-St-Zip: JACKSONVILLE, FL 32257

Title: D ( ) Delete  
Name: HASSAN, SONIA  
Address: 3740 KORI ROAD  
City-St-Zip: JACKSONVILLE, FL 32257

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: HASSAN, ESA  
Address: 5783 MINING TERRACE SUITE 6  
City-St-Zip: JACKSONVILLE, FL 32257

Title: D (X) Change ( ) Addition  
Name: HASSAN, SONIA  
Address: 5783 MINING TERRACE SUITE 6  
City-St-Zip: JACKSONVILLE, FL 32257

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: ESA HASSAN

Electronic Signature of Signing Officer or Director

PRES

04/30/2007

Date