

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000086023

FILED  
Apr 16, 2005  
Secretary of State

Entity Name: RSD SOLUTIONS CORPORATION

**Current Principal Place of Business:**

7230 US HIGHWAY ONE  
GRANT, FL 32949

**New Principal Place of Business:**

**Current Mailing Address:**

7230 US HIGHWAY ONE  
GRANT, FL 32949

**New Mailing Address:**

FEI Number: 02-0638296

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DINGER, SHIRLEY  
7230 US HIGHWAY ONE  
GRANT, FL 32949 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: PRES ( ) Delete  
Name: DINGER, SHIRLEY  
Address: 7230 US HWY 1  
City-St-Zip: GRANT, FL 32949

Title: TRES ( ) Delete  
Name: DINGER, ROBERT  
Address: 7230 US HWY 1  
City-St-Zip: GRANT, FL 32949

**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: SHIRLEY DINGER

PRES

04/16/2005

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date