2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006
Secretary of State

DOCUMENT# P02000095395

Entity Name: ENTERPRISE DEVELOPMENT SOLUTIONS, INC.

Current Principal Place of Business:

4931 WESSEX WAY
LAND O' LAKES, FL 34639 US

New Principal Place of Business:

520 S ARMENIA AVE
UNIT 1239 B
TAMPA, FL 33609 US

Current Mailing Address:

4931 WESSEX WAY
LAND O' LAKES, FL 34639 US

New Mailing Address:

520 S ARMENIA AVE
UNIT 1239 B
TAMPA, FL 33609 US

FEI Number: 01-0692821 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BERTOLASIO, CEDRIC W MR.
4931 WESSEX WAY
LAND O' LAKES, FL 34639 US

Name and Address of New Registered Agent:

BERTOLASIO, CEDRIC W MR.
520 S ARMENIA AVE
UNIT 1239 B
TAMPA, FL 33609 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: CEDRIC W BERTOLASIO 04/10/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: BERTOLASIO, CEDRIC W MR.
Address: 4931 WESSEX WAY
City-St-Zip: LAND O' LAKES, FL 34636 US

Title: VP (X) Delete
Name: BERTOLASIO, CEDRIC W MR.
Address: 4931 WESSES WAY
City-St-Zip: LAND O' LAKES, FL 34639 US

Title: SECR (X) Delete
Name: BERTOLASIO, CEDRIC W MR.
Address: 4931 WESSEX WAY
City-St-Zip: LAND O' LAKES, FL 34639 US

Title: TREA (X) Delete
Name: BERTOLASIO, CEDRIC W MR.
Address: 4931 WESSEX WAY
City-St-Zip: LAND O' LAKES, FL 34639 US

Title: CFO (X) Delete
Name: BERTOLASIO, AMBER M MRS.
Address: 4931 WESSEX WAY
City-St-Zip: LAND O LAKES, FL 34639 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: BERTOLASIO, CEDRIC W MR.
Address: 520 S. ARMENIA AVE
City-St-Zip: TAMPA, FL 33609 US

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

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 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: CEDRIC W BERTOLASIO P 04/10/2006
Electronic Signature of Signing Officer or Director Date