2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000120140

Entity Name: PRECISE SOLUTIONS, CORP.

FILED Apr 30, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1900 SOUTH TREASURE DRIVE 1015 NE 84TH STREET 8 R MIAMI, FL 33138 US

NORTH BAY VILLAGE, FL 33141 US

Current Mailing Address: New Mailing Address:

1900 SOUTH TREASURE DRIVE 1015 NE 84TH STREET #8 R MIAMI, FL 33138 US

NORTH BAY VILLAGE, FL 33414 US

FEI Number: 42-1564701 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HENDERSON, DARIA
1900 SOUTH TREASURE DRIVE
8 R

HENDERSON, DARIA CORPSEC
1015 NE 84TH STREET
MIAMI, FL 33138 US

NORTH BAY VILLAGE, FL 33414 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: DARIA HENDERSON 04/30/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition PERKINS, VERNON PERKINS, VERNON PRES Name: Name: 523 EAST 5TH STREET #8 523 EAST 5TH STREET #8 Address: Address: City-St-Zip: NEW YORK, NY 10009 City-St-Zip: NEW YORK, NY 10009

Title: S () Delete Title: S (X) Change () Addition

Name:HENDERSON, DARIAName:HENDERSON, DARIA SECAddress:1900 SOUTH TREASURE DRIVE, # 8 RAddress:1015 NE 84TH STREETCity-St-Zip:NORTH BAY VILLAGE, FL 33141City-St-Zip:MIAMI, FL 33138

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: DARIA HENDERSON SEC 04/30/2006