2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000012316

Entity Name: RELIABLE SOLUTIONS, INC.

FILED Jul 26, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1792 SW COMFORT STREET PORT ST. LUCIE, FL 34987 **Current Mailing Address: New Mailing Address:** 1792 SW COMFORT STREET PORT ST. LUCIE, FL 34987 FEI Number: 56-2321002 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: SHATTUCK, RALPH 1792 SW CÓMFORT STREET PORT ST. LUCIE, FL 34987 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 Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition SHATTUCK, RALPH SHATTUCK, RALPH Name: Name: 1792 SW COMFORT STREET 1792 SW COMFORT STREET Address: Address: City-St-Zip: PORT ST. LUCIE, FL 34987 City-St-Zip: PORT ST. LUCIE, FL 34987 Title: () Delete Title: MRS. () Change (X) Addition

 Name:
 Name:
 SHATTUCK, LORI N

 Address:
 Address:
 1792 SW. COMFORT ST.

 City-St-Zip:
 City-St-Zip:
 PORT SAINT LUCIE, FL 34987

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: RALPH SHATTUCK MR. 07/26/2007