

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000041814

Entity Name: A PLUS CREDIT SOLUTIONS, INC.

FILED  
Apr 10, 2007  
Secretary of State

**Current Principal Place of Business:**

17 SE 24 AVE  
POMPANO BEACH, FL 330625319

**New Principal Place of Business:****Current Mailing Address:**

17 SE 24 AVE  
POMPANO BEACH, FL 330625319

**New Mailing Address:**

FEI Number: 56-2344306      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

DOUGLAS JOVANOVIC PA  
17 SE 24 AVE  
POMPANO BEACH, FL 330625319 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: PSTD ( ) Delete  
Name: ROBINS, KESHIA N  
Address: 17 SE 24 AVE  
City-St-Zip: POMPANO BEACH, FL 330625319

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

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

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: KESHIA N. ROBINS

PSTD

04/10/2007

Electronic Signature of Signing Officer or Director

Date