2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000057153

FILED Jul 07, 2004 Secretary of State

Entity Nai	me: ONSITE C	OMPUTER SOLUTIONS INC	i.	
Current Principal Place of Business:			New Principal Place of Business:	
9248 COLLINS AVE #202 SURFSIDE, FL 33154			15181 NE 21 AVE NORTH MIAMI BEACH, FL 33161	
Current Mailing Address:			New Mailing Address:	
9248 COLLINS AVE #202 SURFSIDE, FL 33154		PO BOX 402933 MIAMI BEACH, FL 33140		
FEI Number:	:	FEI Number Applied For (X)	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:	
The above in the State	UNRISE BLVD ION, FL 33322 named entity sue of Florida.	US bmits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,
SIGNATU		Signature of Registered Age	ant and	 Date
Election Car	ce with s. 607.193(2)(b), F.S., the corporation did no frust Fund Contribution ().	ot receive the prior notice.	ES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	PD () E O'CONNOR, RAY 5101 COLLINS A MIAMI BEACH, F	VE #11	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	PD () E REID, MERRICK 14260 NE 12 AVE NORTH MIAMI, F		Title: Name: Address: City-St-Zip:	() Change () Addition

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: RAY OCONNOR PD 07/07/2004