

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000057153

FILED  
Mar 31, 2006  
Secretary of State

Entity Name: ONSITE COMPUTER SOLUTIONS INC.

**Current Principal Place of Business:**

15181 NE 21 AVE  
NORTH MIAMI BEACH, FL 33161

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 402933  
MIAMI BEACH, FL 33140

**New Mailing Address:**

FEI Number: 81-0615263

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NIXON, CHRISTINE  
9113 W SUNRISE BLVD  
PLANTATION, FL 33322 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: PD ( ) Delete  
Name: O'CONNOR, RAY  
Address: 5101 COLLINS AVE #11  
City-St-Zip: MIAMI BEACH, FL 33140

Title: PD ( ) Delete  
Name: REID, MERRICK  
Address: 14260 NE 12 AVE  
City-St-Zip: NORTH MIAMI, FL 33161

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

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: MERRICK REID

PD

03/31/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date