2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000071921

Entity Name: BRAIN SOLUTIONS INC.

FILED Aug 30, 2004 Secretary of State

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

3117 KILGORE STREET 5150 CAMBAY STREET ORLANDO, FL 32803 5150 CAMBAY STREET NORTHPORT, FL 34287

Current Mailing Address: New Mailing Address:

3117 KILGORE STREET 1928 JOHNSON FERRY ROAD ORLANDO, FL 32803 APT. M ATLANTA, GA 30319

FEI Number: 41-2600606 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:

CHAN, ANTONY W
3117 KILGORE STREET
ORLANDO, FL 32803

CHAN, ANTONY W
5150 CAMBAY STREET
NORTHPORT, FL 34287

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: 08/30/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: CHAN, ANTONY W Name: CHAN, ANTONY W

Address: 3117 KILGORE STREET Address: 5150 CAMBAY STREET
City-St-Zip: ORLANDO, FL 32803 City-St-Zip: NORTHPORT, FL 34287

 Name:
 CHAN, ANTONY W
 Name:
 CHAN, ANTONY W

 Address:
 3117 KILGORE STREET
 Address:
 5150 CAMBAY STREET

 City-St-Zip:
 ORLANDO, FL 32803
 City-St-Zip:
 NORTHPORT, FL 34287

 Name:
 CHAN, ANTONY W
 Name:
 CHAN, ANTONY W

 Address:
 3117 KILGORE STREET
 Address:
 5150 CAMBAY STREET

 City-St-Zip:
 ORLANDO, FL 32803
 City-St-Zip:
 NORTHPORT, FL 34287

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

Name: Name: CHAN, ALBERT W

Address: Address: 1928 JOHNSON FERRY ROAD, APT. M

City-St-Zip: City-St-Zip: ATLANTA, GA 30319

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: ANTONY W CHAN P 08/30/2004