

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000105224

FILED  
Apr 08, 2009  
Secretary of State

Entity Name: MICHELLE LYNN SOLUTIONS, INC.

**Current Principal Place of Business:**

659 BISCAYNE RIVER DRIVE  
MIAMI, FL 33169 US

**New Principal Place of Business:**

**Current Mailing Address:**

659 BISCAYNE RIVER DRIVE  
MIAMI, FL 33169 US

**New Mailing Address:**

FEI Number: 32-0093683      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

DRANE, DWIGHT  
659 BISCAYNE RIVER DRIVE  
MIAMI, FL 33169 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: V ( ) Delete  
Name: ADDERLEY, MICHELLE L  
Address: 3405 AVE. M  
City-St-Zip: FT. PIERCE, FL 34947 US

Title: V ( ) Delete  
Name: DRANE, DWIGHT  
Address: 200 NW 107TH AVE.  
City-St-Zip: PLANTATION, FL 33324 US

Title: P ( ) Delete  
Name: BRYANT, MAE  
Address: 1001 NW 151ST ST.  
City-St-Zip: MIAMI, FL 33169

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

Title: PD (X) Change ( ) Addition  
Name: ADDERLEY, MICHELLE L  
Address: 3405 AVE. M  
City-St-Zip: FT. PIERCE, FL 34947 US

Title: VSTD (X) Change ( ) Addition  
Name: DRANE, DWIGHT  
Address: 200 NW 107TH AVE.  
City-St-Zip: PLANTATION, FL 33324 US

Title: D (X) Change ( ) Addition  
Name: BRYANT, MAE  
Address: 1001 NW 151ST ST.  
City-St-Zip: MIAMI, FL 33169

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: DWIGHT DRANE

VPST

04/08/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date