## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000119311

FILED Jun 09, 2004 Secretary of State

Entity Name: FINANCE SERVICE SOLUTIONS	NC.
Current Principal Place of Business:	New Principal Place of Business:
7925 NW 12 STREET STE 318 MIAMI, FL 33126	7925 NW 12 STREET SUITE 407 MIAMI, FL 33126
Current Mailing Address:	New Mailing Address:
7925 NW 12 STREET STE 318 MIAMI, FL 33126	7925 NW 12 STREET SUITE 407 MIAMI, FL 33126
FEI Number: 20-0333866 FEI Number Applied For (	) FEI Number Not Applicable ( ) Certificate of Status Desired ( )
Name and Address of Current Registered Agen	nt: Name and Address of New Registered Agent:
GONZALEZ, EDGAR 7925 NW 12 STREET STE 318 MIAMI, FL 33126	
The above named entity submits this statement for in the State of Florida.	the purpose of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Registered	d Agent Date
Election Campaign Financing Trust Fund Contribution ( )	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: DP () Delete	Title: DP (X) Change ( ) Addition

Address: 7925 NW 12 STREET STE 318 Address: 7925 NW 12 STREET STE 318 City-St-Zip: MIAMI, FL 33126 City-St-Zip: MIAMI, FL 33126 Title: DV () Delete Title: () Change () Addition GONZALEZA, EDGAR Name: Name: Address: 7925 NW 12 STREET STE 318 Address: MIAMI, FL 33126 City-St-Zip: City-St-Zip: Title: Title: () Change () Addition DS ( ) Delete

Name: MARTINEZ, PABLO Name: Address: 7925 NW 12 STREET STE 318 Address: City-St-Zip: MIAMI, FL 33126 City-St-Zip:

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: MARWIN MORENO DP 06/09/2004