2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000156150

Entity Name: PRODUCTIVE SOLUTIONS GROUP, INC.

FILED Jan 11, 2005 Secretary of State

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

601 CLEVELAND ST STE 330 601 CLEVELAND ST STE 230 CLEARWATER, FL 33755 CLEARWATER, FL 33755

Current Mailing Address: New Mailing Address:

601 CLEVELAND ST STE 330 601 CLEVELAND ST STE 230 CLEARWATER, FL 33755 CLEARWATER, FL 33755

FEI Number: 41-1441720 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:

OLSEN, ROGER J
601 CLEVELAND ST STE 330
CLEARWATER, FL 33755 US
OLSEN, ROGER J
601 CLEVELAND ST STE 230
CLEARWATER, FL 33755 US
CLEARWATER, FL 33755 US

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: 01/11/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition Name: OLSEN, ROGER J Name: OLSEN, ROGER J

 Address:
 601 CLEVELAND ST STE 330
 Address:
 601 CLEVELAND ST STE 230

 City-St-Zip:
 CLEARWATER, FL 33755
 City-St-Zip:
 CLEARWATER, FL 33755

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

Name:OLSEN, ELIZABETH AName:OLSEN, ELIZABETH AAddress:601 CLEVELAND ST STE 330Address:601 CLEVELAND ST STE 230City-St-Zip:CLEARWATER, FL 33755City-St-Zip:CLEARWATER, FL 33755

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: ELIZABETH A. F. OLSEN VP 01/11/2005