

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000028041

FILED
Jan 27, 2005
Secretary of State

Entity Name: SOL-GRIN SERVICE GROUP INC.

Current Principal Place of Business:

614 ULRICH RD
FT PIERCE, FL 34982 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 12628
FT. PIERCE, FL 34979 26

New Mailing Address:

FEI Number: 84-1636986 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VERNON, JAMES I
614 ULRICH RD
FT. PIERCE, FL 34982 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: VERNON, JAMES I
Address: 614 ULRICH RD.
City-St-Zip: FT PIERCE, FL 34982 US

Title: VD () Delete
Name: GARCIA, MARIO PINEDA
Address: 2703 NW 3RD STREET
City-St-Zip: OKEECHOBEE, FL 34972

Title: SD () Delete
Name: HAWLEY, DONNA
Address: 614 ULRICH ROAD
City-St-Zip: FT PIERCE, FL 34982

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: KERNEY, JOSHUA
Address: 612 ANDERSON CIR APT 110
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD () Change (X) Addition
Name: HUSEMANN, ARRON
Address: 4105 CARRIAGE APT J4
City-St-Zip: POMANO BEACH, FL 33069

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: JAMES I VERNON

PD

01/27/2005

Electronic Signature of Signing Officer or Director

_____ Date