

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000029598

FILED  
Feb 12, 2007  
Secretary of State

Entity Name: TOTAL SOLUTIONS LIMITED, INC.

**Current Principal Place of Business:**

400 KINGS POINT DR,  
#902  
SUNNY ISLES BEACH, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

400 KINGS POINT DR,  
#902  
SUNNY ISLES BEACH, FL 33160

**New Mailing Address:**

FEI Number: 35-2225510      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

VERGANI, MARTA BEATRIZ  
400 KINGS POINT DR, # 902  
SUNNY ISLES BEACH, FL 33160      US

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

VERGANI, MARTA B PRESIDE  
400 KINGS POINT DR, # 902  
SUNNY ISLES BEACH, FL 33160      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: MARTA B VERGANI      02/12/2007  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: VERGANI, MARTA B  
Address: 400 KINGS POINT DR, # 902  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: VP      ( ) Delete  
Name: URRENGOECHEA, JORGE  
Address: 400 KINGS POINT DR, # 902  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: MARTA B VERGANI      PRES      02/12/2007  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date