

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000065740

Entity Name: VTM SOLUTIONS, INC.

FILED
May 01, 2005
Secretary of State

Current Principal Place of Business:

17385 SW 299TH STREET
HOEMSTEAD, FL 330303327

New Principal Place of Business:

17385 SW 299TH STREET
HOMESTEAD, FL 330303327

Current Mailing Address:

17385 SW 299TH STREET
HOEMSTEAD, FL 330303327

New Mailing Address:

17385 SW 299TH STREET
HOMESTEAD, FL 330303327

FEI Number: 20-1167419

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUHN, DAVID A
17385 SW 299TH STREET
HOEMSTEAD, FL 330303327 US

Name and Address of New Registered Agent:

KUHN, DAVID A
17385 SW 299TH STREET
HOMESTEAD, FL 330303327 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: DAVID A. KUHN

05/01/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KUHN, DAVID A
Address: 17385 SW 299TH STREET
City-St-Zip: HOEMSTEAD, FL 330303327

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KUHN, DAVID A
Address: 17385 SW 299TH STREET
City-St-Zip: HOMESTEAD, FL 330303327

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: DAVID A. KUHN

PD

05/01/2005

Electronic Signature of Signing Officer or Director

Date