2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 01, 2007
Secretary of State

DOCUMENT# P04000097676

Entity Name: INFINATE SOLUTIONS, INC

Current Principal Place of Business:

400 LESLIE DRIVE, #508
HALLANDALE, FL 33009

New Principal Place of Business:

400 LESLIE DRIVE
508
HALLANDALE, FL 33009

Current Mailing Address:

400 LESLIE DRIVE, #508
HALLANDALE, FL 33009

New Mailing Address:

1835 HALLANDALE BEACH BLVD
624
HALLANDALE, FL 33009

FEI Number: 20-1319813 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARSHALL, MAXINE
400 LESLIE DRIVE, #508
HALLANDALE, FL 33009 US

Name and Address of New Registered Agent:

MARSHALL, MAXINE
1835 EAST HALLANDALE BEACH BLVD
624
HALLANDALE, FL 33009 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: 09/01/2007
Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: MARSHALL, MAXINE
Address: 400 LESLIE DRIVE, #508
City-St-Zip: HALLANDALE, FL 33009

Title: CEO ( ) Delete
Name: BURNETTE, ANYA
Address: 400 LESLIE DRIVE, #508
City-St-Zip: HALLANDALE, FL 33009

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: MARSHALL, MAXINE
Address: 1835 EAST HALLANDALE BEACH BLVD, #624
City-St-Zip: HALLANDALE, FL 33009

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

I hereby certify that the information supplied with this filing does not qualify 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: MAXINE MARSHALL P 09/01/2007
Electronic Signature of Signing Officer or Director — Date