

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000099001 1. Entity Name FLORIDA INFOTECH SOLUTIONS, INC			
Principal Place of Business 1044 PINEY-Z PLANTATION RD TALLAHASSEE, FL 32311		Mailing Address 1044 PINEY-Z PLANTATION RD TALLAHASSEE, FL 32311	
2. Principal Place of Business Suite, Apt. #, etc. 1044 PINEY-Z PLANTATION RD		3. Mailing Address Suite, Apt. #, etc. 1044 PINEY-Z PLANTATION RD	
City & State TALLAHASSEE, FL		City & State TALLAHASSEE, FL	
Zip 32311		Zip 32311	
Country U.S.A		Country U.S.A	
4. FEI Number 80-0113109		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HUISSO, ANDRE Y 1044 PINEY-Z PLANTATION RD TALLAHASSEE, FL 32311		7. Name and Address of New Registered Agent Name ANDRE Y. HUISSO Street Address (P.O. Box Number is Not Acceptable) 1044 PINEY-Z PLANTATION RD TALLAHASSEE City FL Zip Code 32311	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE <small>Signature, typed or printed name of registered agent and title if applicable.</small>		DATE 01/06/05 <small>(NOTE: Registered Agent signature required when reinstating)</small>	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HUISSO, ANDRE Y 1044 PINEY-Z PLANTATION RD TALLAHASSEE, FL 32311	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 700044675887 01/13/05--01016--012 **150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HUISSO, AYIVI G 11591 SW 148 PATH MIAMI, FL 33196	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GWATHNEY, MIRIAM P 1044 PINEY-Z PLANTATION RD TALLAHASSEE, FL 32311	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		DATE 01/06/05 <small>Daytime Phone #</small>	

FILED
05 JAN -6 PM 2:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01042005 Chg-P CR2E034 (10/03) **TR**