2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000146562

Entity Name: EXPRESS SOLUTION MS INC.

FILED Aug 14, 2007 Secretary of State

| Current Principal Place of Business: | | | New Principal Place of Business: | |
|--|--|--|---|---|
| 10101 SA UNIT 104 | NDY HOLLOW L | .N | | |
| | SPRING, FL 341: | 35 | | |
| Current Mailing Address: | | | New Mailing Address: | |
| 10101 SA UNIT 104 | NDY HOLLOW L | .N | | |
| | SPRING, FL 341 | 35 | | |
| FEI Numbe | r: 14-1917196 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () |
| Name an | d Address of Cu | ırrent Registered Agent: | Name and Address of | of New Registered Agent: |
| 1840 SW 4TH FLO | & UTRERA, P.A 22ND ST. OR _ 33145 US | | | |
| | e named entity su te of Florida. | ubmits this statement for the | purpose of changing its registere | d office or registered agent, or both, |
| SIGNATU | JRE: | | | |
| Electronic Signature of Registered Ager | | | ent | Date |
| | nce with s. 607.193(ampaign Financing | (2)(b), F.S., the corporation did n | ot receive the prior notice. | |
| OFFICERS AND DIRECTORS: | | | | |
| OFFICER | RS AND DIRECT | ` ' | ADDITIONS/CHANG | ES TO OFFICERS AND DIRECTORS |
| OFFICER Title: Name: Address: City-St-Zip: | PD () [GIMENEZ, DAVID 10101 SANDY HO | ORS: Delete D J DLLOW LN 104 | ADDITIONS/CHANG Title: Name: Address: City-St-Zip: | ES TO OFFICERS AND DIRECTORS () Change () Addition |
| Title: Name: Address: | PD ()E GIMENEZ, DAVIE 10101 SANDY HO BONITA SPRING SD ()E GIMENEZ, ARMA 10101 SANDY HO | ORS: Delete D J OLLOW LN 104 , FL 34135 Delete UNDO J OLLOW LN 104 | Title: Name: Address: | |

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: ARMANDO J. GIMENEZ SD 08/14/2007