2008 FOR PROFIT CORPORATION

SIGNATURE:

May 16, 2008 8:00 am Secretary of State ANNUAL REPORT **DOCUMENT # P04000166960** 05-16-2008 90182 001 ***150.00 G T HANDY SOLUTIONS, INC. 05-16-2008 90182 002 *****8.75 Principal Place of Business Mailing Address 43 RUSSO DRIVE 43 RUSSO DRIVE PALM COAST, FL 32164 PALM COAST, FL 32164 04222008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 56-2494905 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent TORRES, GEORGE DO NOT WRITE **43 RUSSO DRIVE** PALM COAST, FL 32164 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agont signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME TORRES, GEORGE 43 RUSSO DR STREET ADDRESS CITY-ST-ZIP PALM COAST, FL 32164 TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITI F NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 of 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.

INTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-08

FILED

2008 FOR PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # P04000166960 ATTACHMENT G T HANDY SOLUTIONS, INC. Principal Place of Business Mailing Address 43 RUSSO DRIVE 43 RUSSO DRIVE PALM COAST, FL 32164 PALM COAST, FL 32164 66010877 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 56-2494905 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent TORRES, GEORGE DO NOT WRITE 43 RUSSO DRIVE PALM COAST, FL 32164 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE TORRES, GEORGE NAME 43 RUSSO DR STREET ADDRESS PALM COAST, FL 32164 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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. 4-28-08 SIGNATURE: PRINTED HAME OF SIGNING OFFICER OR DIRECTOR