2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P04000170501

1. Entity Name

FINANCIAL INSIGHTS AND SOLUTIONS, INC.



FILED Apr 24, 2008 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

625 NORTH FLAGLER DRIVE

SIGNATURE:

P.O. BOX 488

508 West Palm Beach, FL 33401 P.U. BUX 466 PALM BEACH, FL 33480



04202008

No Chg-P

CR2E034 (11/05)

4. FEI Number 38-3713121 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DOORAKIAN, DANIEL ESQ. 625 NORTH FLAGLER DR., 9TH FLOOR WEST PALM BEACH, FL 33401

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4-19-2008

Daytime Phone #

			J			
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 take if applicable. (NOTE, Registered Agent signature required when reinstating) DATE						
FiL After M	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees			\$5.00 May Be Added to Fees	U00000918768 05/13/08-80094-022 150.00
10. OFFICERS AND DIRECTORS						,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RUGGERI, DENNIS 625 NORTH FLAGLER DR., STE. 508 WEST PALM BEACH, FL 33401			•		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			٠			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE			
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TITLE NAME STREET ADDRESS CITY-SI-7IP						

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 truster 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.

ING OFFICER OR DIRECTOR