

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000012532

FILED
Mar 05, 2009
Secretary of State

Entity Name: ONE 2 ONE SOLUTIONS, INC.

Current Principal Place of Business:

12583 S.W. 119TH PLACE
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

12583 S.W. 119TH PLACE
MIAMI, FL 33186

New Mailing Address:

FEI Number: 20-2227850

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACHADO, MARIA I
999 PONCE DE LEON BLVD., #1100
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LOPEZ, ARMANDO
Address: 12583 S.W. 119TH PLACE
City-St-Zip: MIAMI, FL 33186

Title: VD () Delete
Name: LOPEZ, HILDA
Address: 12583 S.W. 119TH PLACE
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: ARMANDO LOPEZ

PD

03/05/2009

Electronic Signature of Signing Officer or Director

_____ Date