

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000013490

FILED  
Mar 13, 2009  
Secretary of State

Entity Name: ADVANCE CREDIT SOLUTIONS, INC.

## Current Principal Place of Business:

12973 SW 112 STREET STE 311  
MIAMI, FL 33186

## New Principal Place of Business:

## Current Mailing Address:

12973 SW 112 STREET STE 311  
MIAMI, FL 33186

## New Mailing Address:

FEI Number: 90-0215866

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RODRIGUEZ, RACHELLE  
12973 SW 112 STREET STE 311  
MIAMI, FL 33186 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: P ( ) Delete  
Name: RODRIGUEZ, JORGE  
Address: 12973 SW 112 STREET STE 311  
City-St-Zip: MIAMI, FL 33186 US

Title: D ( ) Delete  
Name: RODRIGUEZ, RACHELLE  
Address: 12973 SW 112 STREET STE 311  
City-St-Zip: MIAMI, FL 33186 US

Title: VP ( ) Delete  
Name: RODRIGUEZ, OHEN  
Address: 12973 SW 112 STREET STE 311  
City-St-Zip: MIAMI, FL 33186 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change ( ) Addition  
Name: RODRIGUEZ, OTTEN  
Address: 12973 SW 112 STREET STE 311  
City-St-Zip: MIAMI, FL 33186 US

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: RACHELLE RODRIGUEZ

D

03/13/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date