

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000049846

Entity Name: ASK SOLUTIONS, INC.

FILED
Apr 28, 2007
Secretary of State

Current Principal Place of Business:

943 CANDLELIGHT BLVD
BROOKSVILLE, FL 34601 US

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 10496
BROOKSVILLE, FL 34603 US

New Mailing Address:

FEI Number: 32-0145055

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANNE, CARTER-JONES
12430 TOUCHTON DR
104
TAMPA, FL 33617 US

Name and Address of New Registered Agent:

ANNE, CARTER-JONES
4816 SHELL STREAM BLVD
NEW PORT RICHEY, FL 34652 US

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:

04/28/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CARTER-JONES, ANNE
Address: ORCHARD COTTAGE KINGSEND
City-St-Zip: RUISLIP, MIDDX, XX HA4 7DD UK

Title: D () Delete
Name: CARTER-JONES, CHANTELLE
Address: ORCHARD COTTAGE KINGSEND
City-St-Zip: RUISLIP MIDDX, XX HA4 7DD UK

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: ANNE CARTER-JONES

D

04/28/2007

Electronic Signature of Signing Officer or Director

Date