2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 31, 2009
Secretary of State

DOCUMENT# P05000051590

Entity Name: PRFECT SOLUTIONS CONTRACTING CORP

Current Principal Place of Business:

13496 GEMFIRE CT
JACKSONVILLE, FL 32258

New Principal Place of Business:

874 LONG LAKE DR
JACKSONVILLE, FL 32225

Current Mailing Address:

PO BOX 54495
JACKSONVILLE, FL 32245

New Mailing Address:

FEI Number: 20-2638378 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SALAZAR, RANDY
874 LONG LAKE DR
JACKSONVILLE, FL 32225 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: SALAZAR, RANDY
Address: 874 LONG LAKE DR
City-St-Zip: JACKSONVILLE, FL 32225

Title: V (X) Delete
Name: JONES, ROBERT L
Address: 13496 GEMFIRE CT
City-St-Zip: JACKSONVILLE, FL 32258

Title: D (X) Delete
Name: SALAZAR-MADRIGAL, ROSA M
Address: 874 LONG LAKE DR
City-St-Zip: JACKSONVILLE, FL 32225

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: RANDY SALAZAR P 07/31/2009

Electronic Signature of Signing Officer or Director Date