2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000060205

Entity Name: GENRIC INVESTMENTS SOLUTIONS INC

FILED Feb 26, 2009 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
|--------------------------------------|----------------------------------|

10354 SW 159 AVENUE 13507 SW 102 LANE MIAMI, FL 33196 MIAMI, FL 33186

Current Mailing Address: New Mailing Address:

10354 SW 159 AVENUE 13507 SW 102 LANE MIAMI, FL 33196 MIAMI, FL 33186

FEI Number: 56-2513028 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ESPINOZA, ALFREDO

10354 SW 159 AVENUE

MIAMI, FL 33196 US

ESPINOZA, ALFREDO

13507 SW 102 LANE

MIAMI, FL 33186 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: 02/26/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition Name: ESPINOZA, ALFREDO Name: ESPINOZA, ALFREDO

Address: 10354 SW 159 AVENUE Address: 13507 SW 102 LANE
City-St-Zip: MIAMI, FL 33196 City-St-Zip: MIAMI, FL 33186

Title: D () Delete Title: D (X) Change () Addition

 Name:
 RAMOS, RICARDO
 Name:
 ESPINOZA, ROSMARA

 Address:
 10354 SW 159 AVENUE
 Address:
 13507 SW 102 LANE

 City-St-Zip:
 MIAMI, FL 33196
 City-St-Zip:
 MIAMI, FL 33186

Title: D (X) Delete Title: () Change () Addition

 Name:
 DI NOBILE, ABEL
 Name:

 Address:
 10354 SW 159 AVENUE
 Address:

 City-St-Zip:
 MIAMI, FL 33196
 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: ALFREDO ESPINOZA D 02/26/2009