

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000114159

**FILED**  
**Jan 05, 2007**  
**Secretary of State**

**Entity Name:** FLORIDA LANGUAGE SOLUTIONS CORP.

**Current Principal Place of Business:**

1909 W FLORA STREET  
TAMPA, FL 33604 US

**New Principal Place of Business:**

8137 CANTERBURY LAKE BLVD  
TAMPA, FL 33619 US

**Current Mailing Address:**

1909 W FLORA STREET  
TAMPA, FL 33604 US

**New Mailing Address:**

8137 CANTERBURY LAKE BLVD  
TAMPA, FL 33619 US

**FEI Number:** 20-3310728

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LOPEZ, ALAIN  
1909 W. FLORA STREET  
TAMPA, FL 33604 US

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

LOPEZ, ALAIN  
8137 CANTERBURY LAKE BLVD  
TAMPA, FL 33619 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: \_\_\_\_\_

01/05/2007

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: LOPEZ, ALAIN  
Address: 1909 W. FLORA STREET  
City-St-Zip: TAMPA, FL 33604

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: LOPEZ, ALAIN  
Address: 8137 CANTERBURY LAKE BLVD  
City-St-Zip: TAMPA, FL 33619

Title: VP ( ) Change (X) Addition  
Name: LOPEZ, AMBAR  
Address: 8137 CANTERBURY LAKE BLVD  
City-St-Zip: TAMPA, FL 33619

I hereby certify that the information supplied with this filing does not qualify for the 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: ALAIN LOPEZ

P

01/05/2007

Electronic Signature of Signing Officer or Director

Date