

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000148992

Entity Name: FERREIRA SOLUTION SERVICES INC

FILED
May 15, 2006
Secretary of State

Current Principal Place of Business:

4752 WALDEN CIRCLE
738
ORLANDO, FL 32811 US

Current Mailing Address:

4752 WALDEN CIRCLE
738
ORLANDO, FL 32811 US

New Principal Place of Business:

4757 CASON COVE DR
1917
ORLANDO, FL 32811 US

New Mailing Address:

4757 CASON COVE DR
1917
ORLANDO, FL 32811 US

FEI Number: 20-3768800

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ACCOUNT BOOKKEEPING CORP
5950 LAKEHURST DR
246
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

LARSON, CAROLINE
8818 COMMODITY CIR
40
ORLANDO, FL 32819 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: CAROLINE LARSON

05/15/2006

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: DUTRA, JOSE F
Address: 4752 WALDEN CIRCLE,738
City-St-Zip: ORLANDO, FL 32811 US

Title: VP (X) Delete
Name: GERALDO, CARLOS A
Address: 4708 WALDEN CIRCLE,1838
City-St-Zip: ORLANDO, FL 32811 US

Title: T (X) Delete
Name: SOUZA, PAULO S
Address: 4936 CASON COVE DR,101
City-St-Zip: ORLANDO, FL 32811 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DUTRA, JOSE F
Address: 4757 CASON COVE DR APT 1917
City-St-Zip: ORLANDO, FL 32811 US

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 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: JOSE F DUTRA

P

05/15/2006

Electronic Signature of Signing Officer or Director

Date