

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000005787

FILED
Apr 20, 2011
Secretary of State

Entity Name: STRATEGIC IMPACT SOLUTIONS, INC.

Current Principal Place of Business:

16832 SW 5TH WAY
WESTON, FL 33326

New Principal Place of Business:

16832 SW 5TH WAY
WESTON, FL 33326 US

Current Mailing Address:

16832 SW 5TH WAY
WESTON, FL 33326

New Mailing Address:

16832 SW 5TH WAY
WESTON, FL 33326 US

FEI Number: 20-4119095

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PARRA, CESAR
16832 SW 5TH WAY
WESTON, FL 33326 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

OFFICERS AND DIRECTORS:

Title: SR.
Name: PARRA, CESAR
Address: 16832 SW 5TH WAY
City-St-Zip: WESTON, FL 33326 US

Title: SR.
Name: PARRA, CESAR
Address: 16832 SW 5TH WAY
City-St-Zip: WESTON, FL 33326 US

Title: SR.
Name: PARRA, CESAR
Address: 16832 SW 5TH WAY
City-St-Zip: WESTON, FL 33326 US

Title: SR.
Name: PARRA, CESAR
Address: 16832 SW 5TH WAY
City-St-Zip: WESTON, FL 33326 US

Title: SR.
Name: PARRA, CESAR
Address: 16832 SW 5TH WAY
City-St-Zip: WESTON, FL 33326 US

Title: SR.
Name: PARRA, CESAR
Address: 16832 SW 5TH WAY
City-St-Zip: WESTON, FL 33326 US

I hereby 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 all other like empowered.

SIGNATURE: CESAR A. PARRA

CEO

04/20/2011

Electronic Signature of Signing Officer or Director

Date