

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000020738

Entity Name: CN CREDIT SOLUTIONS INC.

FILED  
Jan 23, 2007  
Secretary of State

## Current Principal Place of Business:

5454 HOFFNER AV  
SUITE 101  
ORLANDO, FL 32812

## New Principal Place of Business:

737 WEST OAK RIDGE RD  
ORLANDO, FL 32809

## Current Mailing Address:

5454 HOFFNER AV  
101  
ORLANDO, FL 32812

## New Mailing Address:

737 WEST OAK RIDGE RD  
ORLANDO, FL 32809

FEI Number: 20-5417593

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CELIS, CESAR  
5454 HOFFNER AV  
101  
ORLANDO, FL 32812 US

## Name and Address of New Registered Agent:

CELIS, CESAR A P  
737 WEST OAK RIDGE RD  
ORLANDO, FL 32809 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: CESAR CELIS

01/23/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: CELIS, CESAR  
Address: 5454 HOFFNER AV SUITE 101  
City-St-Zip: ORLANDO, FL 32812

Title: VP ( ) Delete  
Name: TREJOS, NICOLAS  
Address: 5454 HOFFNER AV SUITE 101  
City-St-Zip: ORLANDO, FL 32812

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: CELIS, CESAR A  
Address: 737 WEST OAK RIDGE RD  
City-St-Zip: ORLANDO, FL 32809

Title: VP (X) Change ( ) Addition  
Name: TREJOS, NICOLAS E  
Address: 737 WEST OAK RIDGE RD  
City-St-Zip: ORLANDO, FL 32809

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: NICOLAS E TREJOS

VP

01/23/2007

Electronic Signature of Signing Officer or Director

Date