

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000043444

Entity Name: LASER SOLUTIONS, INC.

FILED  
Aug 28, 2008  
Secretary of State

## Current Principal Place of Business:

6314 WHISKEY CREEK DR  
A  
FORT MYERS, FL 33919

## New Principal Place of Business:

## Current Mailing Address:

6314 WHISKEY CREEK DR  
A  
FORT MYERS, FL 33919

## New Mailing Address:

6065 POMPANO ST.  
FORT MYERS, FL 33919

FEI Number: 30-0360174

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VEST, DEREK  
15750 CATALPA COVE  
FORT MYERS, FL 33908 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

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: VEST, DEREK  
Address: 15750 CATALPA COVE  
City-St-Zip: FORT MYERS, FL 33908

Title: STD ( ) Delete  
Name: VEST, TARA  
Address: 15750 CATALPA COVE  
City-St-Zip: FORT MYERS, FL 33908

Title: VP ( ) Delete  
Name: LIVETTE, MARY E  
Address: 212 EDITH ST  
City-St-Zip: HOUMA, LA 70360

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: LIRETTE, MARY E  
Address: 212 EDITH ST  
City-St-Zip: HOUMA, LA 70360

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: DEREK VEST

P

08/28/2008

Electronic Signature of Signing Officer or Director

Date