
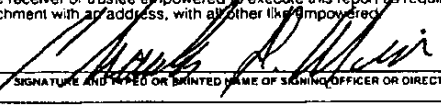


FILED
Jun 06, 2007 8:00 am
Secretary of State

05-08-2007 90012 013 ***150.00

2007 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P06000080398			
1. Entity Name TRACKING SYSTEMS SOFTWARE SOLUTIONS, INC.			
Principal Place of Business 8849 SAN JOSE BLVD. JACKSONVILLE, FL 32217		Mailing Address 8849 SAN JOSE BLVD. JACKSONVILLE, FL 32217	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 20-5028090		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HUSEMAN & MARQUINEZ, P.A. 3733 UNIVERSITY BLVD WEST SUITE 210-B JACKSONVILLE, FL 32217		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering)</small> DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MINOR, CHARLES D 8849 SAN JOSE BLVD JACKSONVILLE, FL 32217 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROYALTY, DANIEL A 8849 SAN JOSE BLVD. JACKSONVILLE, FL 32217 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HUSEMAN, WILLIAM R 8849 SAN JOSE BLVD JACKSONVILLE, FL 32217 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		4-27-07 904-739-5954	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>	

66018030



04262007 Chg-P CR2E034 (12/06)

2007 For Profit Corporation Annual Report

Document #: 06000080398

ATTACHMENT

Entity Name: Tracking Systems Software Solutions, Inc.

Current Principal Place of Business

New Principal Place of Business:

8849 San Jose Blvd.
Jacksonville, Florida 32217

Current Mailing Address:

New Mailing Address:

8849 San Jose Blvd.
Jacksonville, Florida 32217

FBI Number: _____ FBI Number Applied For () FBI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

Hugeman & Marquez, P.A.
3733 University Blvd. West
Suite 210-B
Jacksonville, FL 32217

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: _____

Date: _____

OFFICE AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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

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

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

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

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; 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] Director
Signature Title

4-27-07
Date

ATTACHMENT

66018030

#006000080398

RESOLUTION OF BOARD OF DIRECTORS

I, the undersigned, do hereby certify that this Resolution of the Board of Directors of:
Tracking Systems Software Solutions, Inc. a corporation duly organized and currently
existing under the laws of the State of Florida, was duly adopted on this 27 day of
April, 2007.

Resolved, that the following persons were appointed to serve for a period of one year or until
their successors are appointed or elected and shall qualify as follows:

President/Director Charles Minor
Vice President/Director Daniel Royalty
Treasurer/Director William Huseman
Secretary _____

Charles Minor Director
Signature Title