

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000109765

FILED
Jan 16, 2009
Secretary of State

Entity Name: B&R SOLUTIONS, INCORPORATED

Current Principal Place of Business:

11402 GIBRALTAR PLACE
TAMPA, FL 33617

New Principal Place of Business:

11402 GIBRALTAR PLACE
TAMPA, FL 33617 US

Current Mailing Address:

11402 GIBRALTAR PLACE
TAMPA, FL 33617

New Mailing Address:

11402 GIBRALTAR PLACE
TAMPA, FL 33617 US

FEI Number: 20-5779526

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RASHEED, BARBARA DR
11402 GIBRALTAR PLACE
TAMPA, FL 33617 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RASHEED, BARBARA DR
Address: 11402 GIBRALTAR PLACE
City-St-Zip: TAMPA, FL 33617

Title: V () Delete
Name: HASSAN, RAZI DR
Address: 11402 GIBRALTAR PLACE
City-St-Zip: TAMPA, FL 33617

Title: S () Delete
Name: HARRIMAN, CANDACE
Address: 10501 KUCHA CT
City-St-Zip: RIVERVIEW, FL 33569

Title: DIR () Delete
Name: RASHEED, BARBARA DIRECTO
Address: 11402 GIBRALTAR PLACE
City-St-Zip: TAMPA, FL 33617 24

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: RASHEED, BARBARA DR
Address: 11402 GIBRALTAR PLACE
City-St-Zip: TAMPA, FL 33617 US

Title: V (X) Change () Addition
Name: HASSAN, RAZI DR
Address: 11402 GIBRALTAR PLACE
City-St-Zip: TAMPA, FL 33617 US

Title: S (X) Change () Addition
Name: RASHEED, HASSAN
Address: 11402 GIBRALTAR PL
City-St-Zip: TAMPA, FL 33617 US

Title: DIR (X) Change () Addition
Name: RASHEED, BARBARA DIRECTO
Address: 11402 GIBRALTAR PLACE
City-St-Zip: TAMPA, FL 33617 US

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: BARBARA RASHEED

DIR

01/16/2009

Electronic Signature of Signing Officer or Director

Date