

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000022983

FILED
Apr 30, 2008
Secretary of State

Entity Name: THE CERTIFICATION SOLUTION INC.

Current Principal Place of Business:

3219 W SAN JUAN ST UNIT A
TAMPA, FL 33629

New Principal Place of Business:

Current Mailing Address:

3219 W SAN JUAN ST UNIT A
TAMPA, FL 33629

New Mailing Address:

FEI Number: 14-1990622

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD SUITE 101
TALLAHASSEE, FL 323012960 US

Name and Address of New Registered Agent:

LEWIS-TASIS, ELISABETH
3219 WEST SAN JUAN STREET
A
TAMPA, FL 33629 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: ELISABETH LEWIS-TASIS

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LEWIS, ELISABETH
Address: 3219 W SAN JUAN ST UNIT A
City-St-Zip: TAMPA, FL 33629

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LEWIS-TASIS, ELISABETH
Address: 3219 W SAN JUAN ST UNIT A
City-St-Zip: TAMPA, FL 33629

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: ELISABETH LEWIS-TASIS

D

04/30/2008

Electronic Signature of Signing Officer or Director

Date