2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000037323

Entity Name: SOURCE IT, INC.

FILED Jan 16, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1200 ANASTASIA AVE. 3409 PONCE DE LEON BLVD. 400 CORAL GABLES, FL 33134

CORAL GABLES, FL 33134

Current Mailing Address: New Mailing Address:

1200 ANASTASIA AVE.
400 3409 PONCE DE LEON BLVD.
CORAL GABLES, FL 33134

CORAL GABLES, FL 33134

FEI Number: 20-8695554 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SONIA WILCZEWSKI, PA
1200 ANASTASIA AVENUE
400
CORAL GABLES, FL 33134 US

RAJESH CHATRANI
3409 PONCE DE LEON BLVD.
CORAL GABLES, FL 33134 U

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: RAJESH CHATRANI 01/16/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name: CHATRANI, RAJESH Name: CHATRANI, RAJESH
Address: 1200 ANASTASIA AVENUE, STE. 400 Address: 3409 PONCE DE LEON BLVD.
City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL 33134

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: RAJESH CHATRANI P 01/16/2008

Electronic Signature of Signing Officer or Director

Date