2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000065179

Entity Name: MITERED SOLUTIONS INC.

FILED May 01, 2009 Secretary of State

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

18210 PAULSON DR. 18210 PAULSON DR.

#5 #B5

PORT CHARLOTTE, FL 33954 PORT CHARLOTTE, FL 33954

Current Mailing Address: New Mailing Address:

P.O. BOX 380788 MURDOCK, FL 33938

FEI Number: 74-3216634 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:

BELL, TIMOTHY S

18210 PAULSON DR.

BELL, TIMOTHY S

18210 PAULSON DR.

5 #B5

PORT CHARLOTTE, FL 33954 US PORT CHARLOTTE, FL 33954 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: TIM BELL

ΓΙΜ BELL 05/01/2009

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 BELL, TIMOTHY S
 Name:

 Address:
 18210 PAULSON DR. #5
 Address:

 City-St-Zip:
 PORT CHARLOTTE, FL 33954
 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 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: TIM BELL P/O 05/01/2009