

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000080685

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: YOUR ENVIRONMENTAL SOLUTIONS, INC.

## Current Principal Place of Business:

7222 JASON DR.  
ZEPHYRHILLS, FL 33541

## New Principal Place of Business:

36707 LAUREL OAKS LANE  
DADE CITY, FL 33525

## Current Mailing Address:

7222 JASON DR.  
ZEPHYRHILLS, FL 33541

## New Mailing Address:

36707 LAUREL OAKS LANE  
DADE CITY, FL 33525

FEI Number: 36-4612370

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

PASQUALE, HARRY J  
7222 JASON DRIVE  
ZEPHYRHILLS, FL 33541 US

## Name and Address of New Registered Agent:

PASQUALE, HARRY J  
36707 LAUREL OAKS LANE  
DADE CITY, FL 33525 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:

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: PASQUALE, HARRY J  
Address: 7222 JASON DRIVE  
City-St-Zip: ZEPHYRHILLS, FL 33541

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: PASQUALE, HARRY J  
Address: 36707 LAUREL OAKS LANE  
City-St-Zip: DADE CITY, FL 33525

Title: SECR ( ) Change (X) Addition  
Name: PASQUALE, DEBRA J  
Address: 36707 LAUREL OAKS LANE  
City-St-Zip: DADE CITY, FL 33525

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: DEBRA PASQUALE

SECR

04/30/2009

Electronic Signature of Signing Officer or Director

Date