

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000089164

Entity Name: ABLE SOLUTIONS INC.

FILED
Feb 07, 2011
Secretary of State

Current Principal Place of Business:

5045 SUNRIDGE PALMS DR.
TAMPA, FL 33617 US

New Principal Place of Business:

6084 DREXEL RD
LAND O LAKES, FL 34638 US

Current Mailing Address:

5045 SUNRIDGE PALMS DR.
TAMPA, FL 33617 US

New Mailing Address:

6084 DREXEL RD
LAND O LAKES, FL 34638 US

FEI Number: 26-0756584

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAMBERT, JODY C
5045 SUNRIDGE PALMS DR.
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

OFFICERS AND DIRECTORS:

Title: PRES
Name: LAMBERT, JODY C
Address: 5045 SUNRIDGE PALMS DR.
City-St-Zip: TAMPA, FL 33617 US

Title: SECT
Name: DEMATTI, ROBERT
Address: 5045 SUNRIDGE PALMS DR.
City-St-Zip: TAMPA, FL 33617 US

Title: DIR
Name: LAMBERT, JODY C
Address: 5045 SUNRIDGE PALMS DR.
City-St-Zip: TAMPA, FL 33617 US

Title: S
Name: RIPEL, ROGER
Address: 5045 SUNRIDGE PALMS DR.
City-St-Zip: TAMPA, FL 33617

I hereby 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 all other like empowered.

SIGNATURE: JODY C. LAMBERT

PRES

02/07/2011

Electronic Signature of Signing Officer or Director

Date