

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000090435

Entity Name: PRODUCT SOLUTIONS INC.

**FILED**  
**May 16, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

1666 ARLINGSTON ST  
SARASOTA, FL 34239

## **New Principal Place of Business:**

1850 HIBISCUS ST  
SARASOTA, FL 34239

## **Current Mailing Address:**

1666 ARLINGSTON ST  
SARASOTA, FL 34239

## **New Mailing Address:**

1850 HIBISCUS ST  
SARASOTA, FL 34239

FEI Number: 26-0753236

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

CLARK, LAURIE A  
1666 ARLINGTON ST  
SARASOTA, FL 34239 US

## **Name and Address of New Registered Agent:**

CLARK, LAURIE A  
1850 HIBISCUS ST  
SARASOTA, FL 34239 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: LAURIE A CLARK

05/16/2011

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: PTSD  
Name: CLARK, LAURIE A  
Address: 1850 HIBISCUS ST  
City-St-Zip: SARASOTA, FL 34239

Title: D  
Name: CLARK, MICHAEL F  
Address: 1850 HIBISCUS STREET  
City-St-Zip: SARASOTA, FL 34239

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: MICHAEL F CLARK

D

05/16/2011

Electronic Signature of Signing Officer or Director

Date