

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000097956

FILED
Apr 30, 2008
Secretary of State

Entity Name: INSTANT CASH FLOW SOLUTIONS, INC.

Current Principal Place of Business:

12 SHERWOOD FOREST TRAIL
SUITE E
LUGOFF, SC 29078

New Principal Place of Business:

12 SHERWOOD FOREST TRAIL
SUITE E
LUGOFF, SC 29078 US

Current Mailing Address:

12 SHERWOOD FOREST TRAIL
SUITE E
LUGOFF, SC 29078

New Mailing Address:

12 SHERWOOD FOREST TRAIL
SUITE E
LUGOFF, SC 29078 US

FEI Number: 26-0892090

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RICHARD P. GREENE BUSINESS AND LEGAL SUPPO
2455 E SUNRISE BLVD.
SUITE 905
FT. LAUDERDALE, FL 33304 US

Name and Address of New Registered Agent:

RICHARD P. GREENE BUSINESS AND LEGAL SUPPO
2400 E COMMERCIAL BLVD.
SUITE 201
FT. LAUDERDALE, FL 33308 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: RICHARD P. GREENE

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: WOLLMAN, WILLIAM H
Address: 12 SHERWOOD FOREST TRAIL, #E
City-St-Zip: LUGOFF, SC 29078

Title: P () Delete
Name: MALONEY, TIMOTHY
Address: 12 SHERWOOD FOREST TRAIL, #E
City-St-Zip: LUGOFF, SC 29078

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: TIMOTHY MALONEY

P

04/30/2008

Electronic Signature of Signing Officer or Director

Date