## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000111000

Entity Name: I-CHOICE SOLUTIONS, INC.

FILED Jan 20, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Frincipal Flace Of Business.	New Fillicipal Flace Of Dusiliess.

13555 AUTOMOBILE BLVD #540 13555 AUTOMOBILE BLVD CLEARWATER, FL 33762

STE 530

CLEARWATER, FL 337623838 US

**Current Mailing Address: New Mailing Address:** 

13555 AUTOMOBILE BLVD 13555 AUTOMOBILE BLVD #540

STE 530 CLEARWATER, FL 33762

CLEARWATER, FL 337623838 US

FEI Number: 26-1464402 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PETERS, MICHAEL P PETERS, MICHAEL P 13555 AUTOMOBILE BLVD STE 540 13555 AUTOMOBILE BLVD

CLEARWATER, FL 33762 STE 530 CLEARWATER, FL 337623838 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: MICHAEL P. PETERS 01/20/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete () Change () Addition

SINGH ROY, MOITREYEE Name: Name: 46/31/1, GARIAHAT ROAD, 4TH FLOOR, Address: Address: City-St-Zip: KOLKATA, WB 700029 IN City-St-Zip:

Title: Title: () Change () Addition () Delete Name: SINGHA, AMIT Name:

46/31/1, GARIAHAT ROAD, 4TH FLOOR Address: Address: KOLKATA, WB 700029 IN City-St-Zip: City-St-Zip:

Title: Title: SCFO ( ) Delete SCFO (X) Change ( ) Addition

PETEETE, T.L. Name: PETEETE, TERRY L Name: 4741 CENTRAL #187 4741 CENTRAL #187 Address: Address: City-St-Zip: KANSAS CITY, MO 64112 City-St-Zip: KANSAS CITY, MO 64112

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: MICHAEL P. PETERS RA 01/20/2009