

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000122942

**FILED**  
**Apr 25, 2011**  
**Secretary of State**

**Entity Name:** MARKETING STRATEGIES & SOLUTIONS, INC.

**Current Principal Place of Business:**

4235 VILLAGE DRIVE  
A  
DELRAY BEACH, FL 33445 US

**New Principal Place of Business:**

5850 SOUTH CRANBERRY BOULEVARD  
NORTH PORT, FL 34286 US

**Current Mailing Address:**

4235 VILLAGE DRIVE  
A  
DELRAY BEACH, FL 33445 US

**New Mailing Address:**

5850 SOUTH CRANBERRY BOULEVARD  
NORTH PORT, FL 34286 US

**FEI Number:** 68-0662310

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HAYE, NICOLE C  
4235 VILLAGE DRIVE  
A  
DELRAY BEACH, FL 33445 US

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

HAYE, NICOLE C  
5850 SOUTH CRANBERRY BOULEVARD  
NORTH PORT, FL 34286 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

04/25/2011

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: HAYE, NICOLE C  
Address: 5850 SOUTH CRANBERRY BOULEVARD  
City-St-Zip: NORTH PORT, FL 34286 US

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: NICOLE HAYE

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

DIR

04/25/2011

\_\_\_\_\_  
Date