

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000124235

FILED
May 01, 2009
Secretary of State

Entity Name: SOLUTIONS FOR WEALTH, INC.

Current Principal Place of Business:

3743 CARAMBOLA CIRCLE
MELBOURNE, FL 32940

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 411595
MELBOURNE, FL 329411595

New Mailing Address:

FEI Number: 26-1427185

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUCZINSKI, BRUCE
3743 CARAMBOLA CIRCLE
MELBOURNE, FL 32940 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: O/D () Delete
Name: KUCZINSKI, BRUCE
Address: 3743 CARAMBOLA CIRCLE
City-St-Zip: MELBOURNE, FL 32940

Title: O/D () Delete
Name: KUCZINSKI, MENNA
Address: 3743 CARAMBOLA CIRCLE
City-St-Zip: MELBOURNE, FL 32940

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: BRUCE KUCZINSKI

PRES

05/01/2009

Electronic Signature of Signing Officer or Director

Date