

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000018434

FILED
Apr 22, 2009
Secretary of State

Entity Name: APPROVED CREDIT SOLUTIONS, INC.

Current Principal Place of Business:

902 CLINTMOORE STE, 200
BOCA RATON, FL 33482

New Principal Place of Business:

902 CLINTMOORE STE, 200
BOCA RATON, FL 33487

Current Mailing Address:

PO BOX 5587
LAKE WORTH, FL 33466

New Mailing Address:

902 CLINTMOORE STE, 200
BOCA RATON, FL 33487

FEI Number: 26-2007587

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CAPOZZI, JENNA M
4406 FOREST HILLS BLVD
WEST PALM BEACH, FL 33406 US

Name and Address of New Registered Agent:

CAPOZZI, JENNA M
902 CLINTMOORE RD
200
BOCA RATON, FL 33487 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: JENNA CAPOZZI

04/22/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CAPOZZI, JENNA M
Address: 4406 FOREST HILLS BLVD
City-St-Zip: WEST PALM BEACH, FL 33406

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: CAPOZZI, JENNA M
Address: 902 CLINTMOORE RD SUITE 200
City-St-Zip: BOCA RATON, FL 33487

Title: MGR () Change (X) Addition
Name: MARLON, HERNANDEZ
Address: 902 CLINTMOORE RD SUITE 200
City-St-Zip: BOCA RATON, FL 33487

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: JENNA M. CAPOZZI

PST

04/22/2009

Electronic Signature of Signing Officer or Director

Date