2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000063204

Entity Name: SEALING SOLUTIONS OF CENTRAL FLORIDA INC.

FILED May 19, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1001 ZACHARY CT., SUITE 101 OVIEDO, FL 32765

Current Mailing Address: New Mailing Address:

1001 ZACHARY CT., SUITE 101 OVIEDO, FL 32765

FEI Number: 26-2868112 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:

GILLESPIE, BRANDON
1001 ZACHARY CT., SUITE 101
OVIEDO, FL 32765 US
GILLESPIE, BRANDON
1001 ZACHARY CT. SUITE 101
OVIEDO, FL 32765 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: BRANDON GILLESPIE 05/19/2009

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 ().

Election campaign Financing Trust Fund Contribution ().

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

Title: D () Delete Title: D (X) Change () Addition Name: GILLESPIE, BRANDON Name: GILLESPIE, BRANDON

Address: 1001 ZACHARY CT., SUITE 101 Address: 1001 ZACHARY CT. SUITE 101

City-St-Zip: OVIEDO, FL 32765 City-St-Zip: OVIEDO, FL 32765

Title: D () Delete Title: () Change () Addition

 Name:
 MURPHY, MATT
 Name:

 Address:
 5560 N. DEAN RD.
 Address:

 City-St-Zip:
 ORLANDO, FL 32817
 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: BRANDON GILLESPIE D 05/19/2009