## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000071997

Entity Name: FUSION SERVICES PLUS, INC

**FILED** Apr 30, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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605 N.W. 170 TERRACE PEMBROKE PINES, FL 33028

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

605 N.W. 170 TERRACE PEMBROKE PINES, FL 33028

FEI Number: 26-3084257 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:

PREPETIT, JONATHAN PREPETIT, JONATHAN PRE 605 NW 170 TERRACE 605 NW 170 TERRACE

PEMBROKE PINES, FL 33028 US PEMBROKE PINES, FL 33028 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: JONATHAN MARC PREPETIT 04/30/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition PREPETIT, JONATHAN PREPETIT, JONATHAN VICE PR Name: Name: 605 NW 170 TERRACE 605 NW 170 TERRACE Address: Address: City-St-Zip: PEMBROKE PINES, FL 33028 City-St-Zip: PEMBROKE PINES, FL 33028

Title: () Delete Title: ( ) Change (X) Addition Name: Name: CHARLES, JUMELLE PRESIDE 605 NW 170 TER Address: Address:

PEMBROKE PINES, FL 33028 City-St-Zip: City-St-Zip:

Title: Title: () Delete ( ) Change (X) Addition Name: JEAN LOUIS, MARYSE SECRET Name:

605 NW 170 TH Address: Address:

City-St-Zip: City-St-Zip: PEMBROKE PINES, FL 33028

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.

VΡ SIGNATURE: JONATHAN M PREPETIT 04/30/2009