

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000100165

**FILED**  
**Mar 19, 2010**  
**Secretary of State**

**Entity Name:** FLUENT BUSINESS SOLUTIONS, INC.

**Current Principal Place of Business:**

9000 SHERIDAN STREET  
2A  
PEMBROKE PINES, FL 33024 US

**New Principal Place of Business:**

**Current Mailing Address:**

9000 SHERIDAN ST.  
2A  
PEMBROKE PINES, FL 33024 US

**New Mailing Address:**

9000 SHERIDAN STREET  
2A  
PEMBROKE PINES, FL 33024 US

**FEI Number:** 26-3670385

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MIZERAK, ROBIN S  
5021 LAKEWOOD DRIVE  
COOPER CITY, FL 33330 US

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

MIZERAK, ROBIN S  
9000 SHERIDAN STREET  
PEMBROKE PINES, FL 33024 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:** ROBIN MIZERAK

03/19/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** COCHRANE, DAVID  
**Address:** 100 N FEDERAL HWY, 840  
**City-St-Zip:** FORT LAUDERDALE, FL 33301 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:** DAVID COCHRANE

P

03/19/2010

Electronic Signature of Signing Officer or Director

Date