## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000102665

**Entity Name:** TOTAL NETWORKING SOLUTIONS INC.

FILED Jun 24, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

5526 SW 6TH STREET 3428 WEST 84TH STREET MIAMI, FL 33134

110

HIALEAH, FL 33018

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

5526 SW 6TH STREET 3428 WEST 84TH STREET MIAMI, FL 33134

HIALEAH, FL 33018

FEI Number: 94-3453286 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MOLLEDA, JORGE MOLLEDA, JORGE 1550 W 44TH PL APT E004 7160 NW 179TH STREET HIALEAH, FL 33012 104

HIALEAH, FL 33015 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: JORGE MOLLEDA 06/24/2009

> 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 ( ).

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

Title: () Delete Title: (X) Change ( ) Addition MOLLEDA, JORGE MOLLEDA, JORGE Name: Name: 5526 SW 6TH STREET 7160 NW 179TH STREET Address: Address: City-St-Zip: MIAMI, FL 33134 City-St-Zip: HIALEAH, FL 33015

Title: ( ) Delete Title: (X) Change ( ) Addition Name: SILVEIRA, ARCE Name: SILVEIRA, ARCE

5526 SW 6TH STREET Address: 19904 BOB O LINK DRIVE Address: MIAMI, FL 33134 HIALEAH, FL 33015 City-St-Zip: 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.

VΡ SIGNATURE: JORGE MOLLEDA 06/24/2009