

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000039162

Entity Name: C.H.I. SOLUTIONS, INC.

**FILED**  
**Apr 25, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

3422 GRIFFIN DR  
DANIA BEACH, FL 33312

**New Principal Place of Business:**

**Current Mailing Address:**

3422 GRIFFIN DR  
DANIA BEACH, FL 33312

**New Mailing Address:**

FEI Number: 26-4815793

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

TRICK, WATSON JR  
1216 EAST ATLANTIC BLVD STE 7  
POMPANO BEACH, FL FL3303306 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: MARIOTTI, ASTRID  
Address: 2661 S.E. HAMDEN RD  
City-St-Zip: PORT ST LUCIE, FL 34952

Title: DVST  
Name: BEDUSA, GREGORY  
Address: 6200 NW 58 WAY  
City-St-Zip: PARKLAND, FL 33067

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: ASTRID MARIOTTI

DP

04/25/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date