

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000064716

**FILED**  
**Apr 30, 2011**  
**Secretary of State**

**Entity Name:** THE PERFECT SOLUTION SERVICES INC

**Current Principal Place of Business:**

170 NW 42 COURT  
POMPANO BEACH, FL 33064

**New Principal Place of Business:**

170 NW 42 COURT  
DEERFIELD BEACH, FL 33064

**Current Mailing Address:**

170 NW 42 COURT  
POMPANO BEACH, FL 33064

**New Mailing Address:**

170 NW 42 COURT  
DEERFIELD BEACH, FL 33064

**FEI Number:** 27-3191154

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RIZO, RICHARD  
170 NW 42 COURT  
POMPANO BEACH, FL 33064 US

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

RIZO, RICHARD  
170 NW 42 COURT  
DEERFIELD BEACH, FL 33064 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:

04/30/2011

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: RIZO, RICHARD  
Address: 170 NW 42 COURT  
City-St-Zip: DEERFIELD BEACH, FL 33064

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: RICHARD RIZO

PRES

04/30/2011

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

\_\_\_\_\_  
Date