

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000011367

FILED  
May 08, 2009  
Secretary of State

Entity Name: SEVEN PERCENT SOLUTION, INC.

## Current Principal Place of Business:

1409 NW 124TH AVE  
PEMBROKE PINES, FL 33026 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 820663  
SOUTH FLORIDA, FL 33082 US

## New Mailing Address:

FEI Number: 65-0470494      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FRIEDMAN, ALAN  
1409 NW 124 AVE.  
PEMBROKE PINES, FL 33026 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

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:

Title: D ( ) Delete  
Name: FRIEDMAN, ALAN  
Address: 1409 NW 124 AVE.  
City-St-Zip: PEMBROKE PINES, FL 33026

Title: D ( ) Delete  
Name: FRIEDMAN, SUZANNE  
Address: 1409 NW 124 AVE.  
City-St-Zip: PEMBROKE PINES, FL 33026

Title: D ( ) Delete  
Name: SENS, GILBERT  
Address: 1409 NW 124 AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33026

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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.

SIGNATURE: ALAN FRIEDMAN

D

05/08/2009

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

\_\_\_\_\_  
Date