

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 11, 2007 08:00 AM
Secretary of State

DOCUMENT # P94000057677 1. Entity Name MOUNTING SOLUTIONS PLUS, INC.	
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Principal Place of Business 10655 SW 185TH TER MIAMI, FL 33157	Mailing Address PO BOX 97-1202 MIAMI, FL 33197 US
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent SCHEER, NED 10655 SW 185TH TER MIAMI, FL 33157	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SCHEER, NED 10655 SW 185TH TER MIAMI, FL 33157
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	<u>1/8/07</u> Date	<u>305-720-6980</u> Daytime Phone #
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