

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000053635

FILED
Apr 19, 2005
Secretary of State

Entity Name: PERFECT SOLUTIONS SOFTWARE, INC.

Current Principal Place of Business:

15950 SCHWEIZER COURT
W. PALM BEACH, FL 33414

New Principal Place of Business:

10763 VERSAILLES BLVD
WELLINGTON, FL 33467

Current Mailing Address:

15950 SCHWEIZER COURT
W. PALM BEACH, FL 33414

New Mailing Address:

10763 VERSAILLES BLVD
WELLINGTON, FL 33467

FEI Number: 65-0606640

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRAMER, ANDREW
15950 SCHWEIZER COURT
W. PALM BEACH, FL 33414 US

Name and Address of New Registered Agent:

KRAMER, ANDREW
10763 VERSAILLES BLVD
WELLINGTON, FL 33467 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:

04/19/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVTs () Delete
Name: KRAMER, ANDREW R
Address: 15950 SCHWEIZER CT
City-St-Zip: W PALM BCH, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVTs (X) Change () Addition
Name: KRAMER, ANDREW R
Address: 10763 VERSAILLES BLVD
City-St-Zip: WELLINGTON, FL 33467

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ANDREW KRAMER

PRES

04/19/2005

Electronic Signature of Signing Officer or Director

Date