

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000088271

FILED
Feb 04, 2005
Secretary of State

Entity Name: SOLUTIONS ENTERPRISES, INC.

Current Principal Place of Business:

225 MENTOR DRIVE
NAPLES, FL 34110

New Principal Place of Business:

3880 VIA DEL REY
SUITE # 101
BONITA SPRINGS, FL 34134

Current Mailing Address:

225 MENTOR DRIVE
NAPLES, FL 34110

New Mailing Address:

3880 VIA DEL REY
SUITE # 101
BONITA SPRINGS, FL 34134

FEI Number: 59-3412440

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROY, CATHERINE A
225 MENTOR DRIVE
NAPLES, FL 34110 US

Name and Address of New Registered Agent:

ROY, CATHERINE A
3880 VIA DEL REY
SUITE # 101
BONITA SPRINGS, FL, FL 34134 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:

02/04/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROY, CATHERINE A
Address: 225 MENTOR DRIVE
City-St-Zip: NAPLES, FL 34110

Title: VP () Delete
Name: ROY, RONALD R
Address: 225 MENTOR DRIVE
City-St-Zip: NAPLES, FL 34110

Title: S () Delete
Name: SAUNDERS, ABBIE
Address: 217 MENTOR DR
City-St-Zip: NAPLES, FL 34110

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 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: CATHERINE A ROY

P

02/04/2005

Electronic Signature of Signing Officer or Director

Date