2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000041660

Entity Name: SHOWMAR SOLUTIONS INC.

FILED Jan 27, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2921 PLANTAIN DRIVE 6727 MAIN STREET

HOLIDAY, FL 34691 US NEW PORT RICHEY, FL 34653 US

Current Mailing Address: New Mailing Address:

2921 PLANTAIN DRIVE 6727 MAIN STREET

HOLIDAY, FL 34691 US NEW PORT RICHEY, FL 34653 US

FEI Number: 65-0755428 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SHOWEN, WILLIAM J
2921 PLANTAIN DRIVE
SHOWEN, WILLIAM J
6727 MAIN STREET

HOLIDAY, FL 34691 US NEW PORT RICHEY, FL 34653 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: 01/27/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD () Delete Title: VD (X) Change () Addition

Name: SHOWEN, PAULA M
Address: 2921 PLANTAIN DRIVE

Name: SHOWEN, PAULA M
Address: 6727 MAIN STREET

City-St-Zip: HOLIDAY, FL 34691 City-St-Zip: NEW PORT RICHEY, FL 34653

Title: PD () Delete Title: PD (X) Change () Addition

Name: SHOWEN, WILLIAM J Name: SHOWEN, WILLIAM J Address: 2921 PLANTAIN DRIVE Address: 6727 MAIN STREET

City-St-Zip: HOLIDAY, FL 34691 City-St-Zip: NEW PORT RICHEY, FL 34653

I hereby certify that the information supplied with this filing does not qualify for the 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: WILLIAM J. SHOWEN CEO 01/27/2007

Electronic Signature of Signing Officer or Director

Date