2005 FOR PROFIT CORPORATION ___ANNUAL REPORT

SIGNATURE: __

FILED Apr 12, 2005 08:00 AM Secretary of State

DOCUMENT # P98000098514 1. Entity Name SYSTEMS DEVELOPMENT SÖLUTIONS, INC.					Secretary of State
Principal Place of Business Mailing Address 2656 BANTRY BAY DR. TALLAHASSEE, FL 32309 TALLAHASSEE, FL 32309					O'N THE STATE OF THE
DO NOT WRITE IN THIS SPACE				04062005 No Chg-P CR2E034 (10/03) 4. FEI Number	
6. Name and Address of Current Registered Agent MESSIHA, SAMUIEL 2656 BANTRY BAY DR. TALLAHASSEE, FL 32309 DO NOT WRITE IN THIS SPACE					
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, types of prints are not registered agent and title if apply, able (NOTE Registered Agent agreed when registered when remarkang) OHIT CATE					
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Election Campaign Final Trust Fund Contribution		.00 May Be ed to Fees	
10. TIPLE NAME STREET ADDRESS CHY-ST-ZIP	PYD MESSIHA, SAMUIEL 2656 BANTRY BAY DRIVE TALLAHASSEE, FL 32309	CTORS			
TITLE NAME STREET ADDRESS CITY+ST-ZIP				ľ	U00000300354 04/12/05-80015-021 150.00
NAME STREET ADDRESS CITY-ST-ZIP		<u> </u>			NOT WRITE HIS SPACE
NAME STREET ADDRESS CITY ST. ZIP			_	IIN I	nis space
NAME STREET ADDRESS CITY-ST ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		P. J. A. 182 C. U.	moles detected in Co	otion 110 07(9)(1)	Florida Statutes I further certify that the information
12. Thereby of indicated of the corchanged.	certify that the information supplied with this fi on this report of supplemental report is true reporation or the raceiver or trustee empowerer or on an attachment with an address, with al	ling does not quality for the exe and accurate and that my signa 3 to execute this report as requi I other like empowered	emption stated in Se ture shall have the s ired by Chapter 607	same legal effect a f, Florida Statutes,	Florida Statutes. I further certify that the information is if made under oath; that I am an officer or director and that my name appears in Block 10 or Block 11 if