

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000003083

FILED
Jan 14, 2005
Secretary of State

Entity Name: MULTI MICRO SOLUTIONS, INC.

Current Principal Place of Business:

11250 OLD ST. AUGUSTINE RD.
STE 15-356
JACKSONVILLE, FL 32257

New Principal Place of Business:

Current Mailing Address:

19501 W. CATAWBA AVENUE
STE. 13
CORNELIUS, NC 28031

New Mailing Address:

FEI Number: 59-3556681

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOEDERT, JERRY R
11250 OLD ST. AUGUSTINE RD.
STE 15-356
JACKSONVILLE, FL 32257 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GOEDERT, JERRY R
Address: 7825 LEISURE LANE
City-St-Zip: HUNTERSVILLE, NC 28078

Title: D () Delete
Name: EVANS, LARRY
Address: 324 ARIES DRIVE
City-St-Zip: JACKSONVILLE, FL 32073

Title: O () Delete
Name: EVANS, DEBORAH
Address: 324 ARIES DRIVE
City-St-Zip: JACKSONVILLE, FL 32073

Title: O () Delete
Name: GOEDERT, SAMANTHA L
Address: 7825 LEISURE LN
City-St-Zip: HUNTERSVILLE, NC 28078

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:

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: JERRY R GOEDERT

D

01/14/2005

Electronic Signature of Signing Officer or Director

Date