

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000037658

FILED
Jan 29, 2006
Secretary of State

Entity Name: EMPLOYEE BUSINESS SOLUTIONS, INC.

Current Principal Place of Business:

8491 NW 19TH STREET
PEMBORKE PINES, FL 33024

New Principal Place of Business:

Current Mailing Address:

8491 NW 19TH STREET
PEMBROKE PINES, FL 33024

New Mailing Address:

FEI Number: 65-0914949

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BREKKA, JOHN A JR.ESQ.
4601 SHERIDAN ST.,STE.202
% LAW OFFICE OF LEE H. SCHILLINGER, P.A.
HOLLYWOOD, FL 33021 US

Name and Address of New Registered Agent:

BREKKA, CHRISTOPHER J
8491 NW 19TH STREET
PEMBROKE PINES, FL 33024 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: CHRISTOPHER J. BREKKA

01/29/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BREKKA, CHRISTOPHER J
Address: 3366 N.W. 68 AVENUE
City-St-Zip: MARGATE, FL 330638022

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BREKKA, CHRISTOPHER J
Address: 8491 NW 19TH STREET
City-St-Zip: PEMBROKE PINES, FL 33024

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: CHRISTOPHER J. BREKKA

PRES

01/29/2006

Electronic Signature of Signing Officer or Director

Date