2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P99000100434 **DOCUMENT #**

1. Entity Name

SOLUTION STREET, INC.



FILED Feb 28, 2003 8:00 am Secretary of State 02-28-2003 90159 015 ***150.00

Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Country Zip Country Zip Country S. Certificate of Status Desired Set. F. Name and Address of New Registered Agent WHITE, MATTHEW J 6703 BANNER LAKE CIR., STE. 10111 ORLANDO FL 32821 City FL Zi City F				OO WE THE			
Suite, Apt. #, etc. Suite, Apt. #, etc. City & Stato Country Zip Country 5. Certificate of Status Desired 8. Name and Address of Current Registered Agent Name Na	6703 BANNER LAKE CIR., STE. 10111		6703 BANNER LAKE CIR	STE. 10111]		
City & State Country Zip Country 5. Certificate of Status Desired Fee F Fe	2. Principal F	Place of Business	3. Mailing Address	Iress CHECK HERE IF MAKING CHANGES			
Zip Country Zip Country S. Service Ser	Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES		
G. Name and Address of Current Registered Agent WHITE, MATTHEW J 6703 BANNER LAKE CIR., STE. 10111 ORLANDO FL 32821 B. The above named entry submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Florida. I am familia the obligations of registered agent and title if applications. (NOTE Registered Agent agriculture invalued when recetainty) FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS TITLE NAME STREET ADDRESS OTH-S1-ZP TITLE Delete TITLE NAME STREET ADDRESS OTH-S1-ZP TITLE Delete TITLE NAME STREET ADDRESS OTH-S1-ZP TITLE NAME STREET ADDRESS OTH-S1-ZP TITLE Delete TITLE NAME STREET ADDRESS OTH-S1-ZP TITLE NAME STREET ADDRESS OTH-S1-ZP TITLE NAME STREET ADDRESS OTH-S1-ZP TITLE Delete TITLE NAME STREET ADDRESS OTH-S1-ZP TITLE DELET	City & Stat	e	City & State	·	9953611371		
S. Name and Address of Current Registered Agent WHITE, MATTHEW J 6703 BANNER LAKE CIR., STE. 10111 QRIANDO FL 32821 8. The above named entity submits this statement for the purpose of changing its registered Agent signature required agent, or both, in the State of Florida. I am familiar the obligations of registered agent and site if applicable. NOTE Registered Agent signature required when mentativity. PLE NOW!!! FEE IS 5150.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECT	Zip	Country	Zip	Country	5 Cortificate of Status Decired \$8.75 Additional		
WHITE, MATTHEW J 6703 BANNER LAKE CIR., STE. 10111 ORLANDO FL 32821 6. 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 the collegators of registered agent and still applicable. (NOTE: Registered Agent segretary required when revoluted when revoluted in the Collegators of Population of Princed Agent and still applicable. (NOTE: Registered Agent segretary required when revoluted agent and stole applicables. SIGENATURE Agents 10.	6. Name and Address of Current Registered Age			<u> </u>			
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ORLANDO FL 32821 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 the obligations of registered agent. SIGNATURE Signature. Typed or printed name of registered agent and title if applicable. NOTE: Registered Agent algreature required when ministring) DATE		ATTHEW J					
B. 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 familia the obligations of registered agent. SIGNATURE Signature. Nymed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when rendeting) DATE							
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplementarize and that my 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 rustee expower to provide this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment w

SIGNATURE:

MAGHEW J. WHITE