2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S10268

FILED Apr 12, 2009 Secretary of State

| Entity Nar | ne: STRUC | FALL TECH SOLUTIONS, INC. | | | | | |
|---|---|--------------------------------------|---|---|---------------------|-------------------|--|
| Current Principal Place of Business: | | | New Princ | New Principal Place of Business: | | | |
| 350 BURB. OLDSMAR | ANK RD 2, FL 34677 | US | | | | | |
| Current Mailing Address: | | | New Mailir | New Mailing Address: | | | |
| 350 BURB. OLDSMAR | ANK RD. R, FL 34677 | US | | | | | |
| FEI Number: | 59-3036629 | FEI Number Applied For () | l Number Not Appli | cable () | Certificate of Stat | tus Desired() | |
| Name and | Address of | Current Registered Agent: | Name and | Name and Address of New Registered Agent: | | | |
| SUITE A | HOMAS C. COACHMAN ATER, FL 346 | | | | | | |
| | named entity of Florida. | submits this statement for the purpo | se of changing it | s registered of | fice or registere | d agent, or both, | |
| SIGNATUF | RE: | | | | | | |
| | Electro | nic Signature of Registered Agent | | | Date | | |
| Election Can | npaign Financir | ng Trust Fund Contribution (). | | | | | |
| OFFICERS | S AND DIREC | CTORS: | ADDITION | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | | |
| Title: Name: Address: City-St-Zip: | PD (MEYERSON, 3 350 BURBANK OLDSMAR, FL | (ROAD | Title: Name: Address: City-St-Zip: | () | Change () Additio | n | |
| Title: Name: Address: City-St-Zip: | VP (O'NEILL, ANTH 350 BURBANH OLDSMAR, FL | (ROAD | Title: Name: Address: City-St-Zip: | S (X) JOAN, MEYERS 350 BURBANK F OLDSMAR, FL | ROAD | on | |
| Title: Name: Address: City-St-Zip: | D (FORSBERG, , 350 BURBANK OLDSMAR, FL | (ROAD | Title: Name: Address: City-St-Zip: | () | Change () Additio | n | |

I hereby certify that the information supplied with this filing does not qualify 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: STEVE MEYERSON PD 04/12/2009