2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S39068

Title:

Name:

Address:

City-St-Zip:

PTS

() Delete

AGUIRRE, LUCRECIA

8905 NW 28TH DRIVE #8

CORAL SPRINGS, FL 33065

Entity Name: SOLUTION SPECIALTIES, INC.

FILED Mar 16, 2009 Secretary of State

•	
Current Principal Place of Business:	New Principal Place of Business:
3400 N.W. 151ST TERRACE MIAMI, FL 33054 US	
Current Mailing Address:	New Mailing Address:
3400 NW 151ST TERRACE MIAMI, FL 33054 US	3400 N.W. 151ST TERRACE MIAMI, FL 33054 US
FEI Number: 65-0252249 FEI Number Applied For () FEI Number	mber Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
AGUIRRE, RAUL 17310 SW 22 ST MIRAMAR, FL 33029 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:	
Electronic Signature of Registered Agent	Date
Election Campaign Financing Trust Fund Contribution ().	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: VP () Delete Name: AGUIRRE, RAUL Address: 17310 SW 22 ST City-St-Zip: MIRAMAR, FL 33029	Title: () Change () Addition Name: Address: City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

PTS

AGUIRRE, LUCRECIA

8905 NW 28TH DRIVE # B

CORAL SPRINGS, FL 33065

(X) Change () Addition

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: RAUL AGUIRRE VP 03/16/2009