

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S88092

FILED  
Feb 26, 2008  
Secretary of State

Entity Name: HARDSOFT SOLUTIONS, INC.

## Current Principal Place of Business:

8950 NW 27TH STREET  
MIAMI, FL 33172 US

## New Principal Place of Business:

## Current Mailing Address:

8950 NW 27TH STREET  
MIAMI, FL 33172 US

## New Mailing Address:

FEI Number: 65-0294661

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

PUENTES, JESUS R.  
8950 NW 27TH STREET  
MIAMI, FL 33172 US

## Name and Address of New Registered Agent:

PUENTES, FRANK R.  
8950 NW 27TH STREET  
MIAMI, FL 33172 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: FRANK R PUENTES

02/26/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VTS ( ) Delete  
Name: PUENTES, JESUS R  
Address: 8950 NW 27 ST  
City-St-Zip: MIAMI, FL 33172

Title: P ( ) Delete  
Name: PUENTES, FRANK R  
Address: 8950 NW 27 ST  
City-St-Zip: MIAMI, FL 33172

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change ( ) Addition  
Name: PUENTES, FRANK R.  
Address: 8950 NW 27 ST  
City-St-Zip: MIAMI, FL 33172

Title: P (X) Change ( ) Addition  
Name: LUIS, HANSEL  
Address: 8950 NW 27 ST  
City-St-Zip: MIAMI, FL 33172

Title: VTS ( ) Change (X) Addition  
Name: LUIS, YANELIN  
Address: 8950 NW 27 ST  
City-St-Zip: MIAMI, FL 33172

Title: D ( ) Change (X) Addition  
Name: GONZALEZ, RAMON  
Address: 8950 NW 27 ST  
City-St-Zip: MAIMI, FL 33172

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: RAMON GONZALEZ

D

02/26/2008

Electronic Signature of Signing Officer or Director

Date