

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **V24581** (3)

1. Corporation Name

MASTER SOLUTIONS, INC.



Principal Place of Business

Mailing Address

**1508 CASCADE ST
DUNEDIN, FL 34698
US**

**1508 CASCADE CT
DUNEDIN FL 34698
US**

3. Date Incorporated or Qualified
03/25/1992

3a. Date of Last Report
02/14/1995

2. Principal Place of Business

2a. Mailing Address

21 **11788 66th St. N.**

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 **Largo, FL 34643**

28 Zip

25 Country

29 Zip

26 Country

30 Country

4. FEI Number

36-3817256

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**RIESENBERG, PAUL
1508 CASCADE COURT
DUNEDIN FL 34698**

81 Name

Mr. Paul Riesenber

82 Street Address (P.O. Box Number is Not Acceptable)

11788 - 66th Street North

83

84 City

Largo

FL

85 Zip Code
34643

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Paul Riesenber

(NOTE: Registered Agent signature required when reinstating)

DATE **3/11/96**

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
P	RIESENBERG, PAUL	1508 CASCADE COURT	DUNEDIN FL	
				<input type="checkbox"/> DELETE
				<input type="checkbox"/> DELETE
				<input type="checkbox"/> DELETE
				<input type="checkbox"/> DELETE
				<input type="checkbox"/> DELETE
				<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Paul Riesenber

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

813-5478845 3/11/96

Date

Daytime Phone

CR2E034 (12/95)