

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J60942

**Entity Name:** SOLUTION CONCEPTS, INC.

**Current Principal Place of Business:**

% CLAUDE MYER  
10601 SW PRATT WHITNEY ROAD  
STUART, FL 34997

**Current Mailing Address:**

% CLAUDE MYER  
10601 SW PRATT WHITNEY ROAD  
STUART, FL 34997

**FEI Number:** 65-0001559

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MASSEY-MYER, RITA RA  
10601 SW PRATT WHITNEY ROAD  
STUART, FL 34997 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

**Officer/Director Detail :**

|                 |                             |                 |                             |
|-----------------|-----------------------------|-----------------|-----------------------------|
| Title           | PSTD                        | Title           | V                           |
| Name            | MYER, CLAUDE L              | Name            | MASSEY-MYER, RITA           |
| Address         | 10601 SW PRATT WHITNEY ROAD | Address         | 10601 SW PRATT WHITNEY ROAD |
| City-State-Zip: | STUART FL 34997             | City-State-Zip: | STUART FL 34997             |

*I hereby 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 all other like empowered.*

**SIGNATURE:** RITA MASSEY-MYER

**VICE PRESIDENT**

**04/28/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date