

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F36681

**FILED**  
**Apr 25, 2005**  
**Secretary of State**

**Entity Name:** ANDREWS CONSULTING, INC.

**Current Principal Place of Business:**

6574 N STATE ROAD SEVEN  
SUITE 115  
COCONUT CREEK, FL 33073 US

**Current Mailing Address:**

6574 N STATE ROAD SEVEN  
SUITE 115  
COCONUT CREEK, FL 33073 US

**FEI Number:** 59-2129192

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**New Principal Place of Business:**

6574 N STATE ROAD SEVEN  
PMB 115  
COCONUT CREEK, FL 33073 US

**New Mailing Address:**

6574 N STATE ROAD SEVEN  
PMB 115  
COCONUT CREEK, FL 33073 US

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

DIPARDO, CHARLES J.  
6574 N STATE RD SEVEN  
SUITE 115  
COCONUT CREEK, FL 33073 US

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

DIPARDO, CHARLES J.  
6574 N STATE RD SEVEN  
PMB 115  
COCONUT CREEK, FL 33073 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

04/25/2005

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: DIPARDO, CHARLES J.,  
Address: 6574 N. STATE ROAD SEVEN, SUITE 115  
City-St-Zip: CORAL SPRINGS, FL 33073

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: DIPARDO, CHARLES J  
Address: 6574 N. STATE ROAD SEVEN, PMB 115  
City-St-Zip: COCONUT CREEK, FL 33073

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CHARLES J. DIPARDO

Electronic Signature of Signing Officer or Director

P

04/25/2005

Date