2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000114337

Entity Name: LCMF CONSULTANTS, INC.

FILED Apr 27, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

11715 SINDLESHAM CT. 2800 W.OAKLAND PARK BLVD

ORLANDO, FL 32837 107

FORT LAUDERDALE, FL 33311

Current Mailing Address: New Mailing Address:

11310 S. ORANGE BLOSSOM TRAIL #375 2800 W.OAKLAND PARK BLVD ORLANDO, FL 32837

FORT LAUDERDALE, FL 33311

FEI Number: 59-3690548 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LAMOTHE, FERNAND LAMOTHE, FERNAND 2800 W.OÁKLAND PARK BLVD #107 721 SE 17TH STREET

FORT LAUDERDALE, FL 33316 US FORT LAUDERDALE, FL 33311

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: 04/27/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

LARIN, CHRISTIAN LARIN, CHRISTIAN Name: Name:

11310 S. ORANGE BLOSSOM TRAIL #375 2800 W.OAKLAND PARK BLVD #107 Address: Address: City-St-Zip: ORLANDO, FL 32837 City-St-Zip: FORT LAUDERDALE, FL 33311

() Delete Title: VSD Title: VSD (X) Change () Addition Name: LARIN, LOUISE Name: LARIN. LOUISE

11310 S. ORANGE BLOSSOM TRAIL #375 Address: 2800 W.OAKLAND PARK BLVD #107 Address:

ORLANDO, FL 32837 FORT LAUDERDALE, FL 33311 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

Ρ SIGNATURE: CHRISTIAN LARIN 04/27/2006