

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000021861

FILED  
Feb 06, 2008  
Secretary of State

Entity Name: THE BUONICONTI CONSULTING GROUP, INC.

**Current Principal Place of Business:**

122 SE 6TH AVE.  
1  
DELRAY BEACH, FL 33483

**New Principal Place of Business:**

**Current Mailing Address:**

122 SE 6TH AVE  
1  
DELRAY BEACH, FL 33483

**New Mailing Address:**

122 SE 6TH AVE.  
1  
DELRAY BEACH, FL 33483

FEI Number: 48-1304796

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BUONICONTI, ROBERT  
122 SE 6TH AVE  
DELRAY BEACH, FL 33483 US

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

BUONICONTI, ROBERT M  
122 SE 6TH AVE  
1  
DELRAY BEACH, FL 33483 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: ROBERT M. BUONICONTI

02/06/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: BUONICONTI, ROBERT M PRES.  
Address: 122 SE 6TH AVE, #1  
City-St-Zip: DELRAY BEACH, FL 33483

Title: OFF ( ) Delete  
Name: BUONICONTI, CANDIS C OFF.MGR  
Address: 122 SE 6TH AVE. #1  
City-St-Zip: DELRAY BEACH, FL 33483

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ROBERT M. BUONICONTI

PRES

02/06/2008

Electronic Signature of Signing Officer or Director

Date