


Apr 28, 2005 08:00 AM
Secretary of State

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P03000068562		
1. Entity Name STUART KAUFMAN CONSULTING, INC.		
Principal Place of Business 150 NIGHTHAWK AVENUE PLANTATION, FL 33324	Mailing Address 150 NIGHTHAWK AVENUE PLANTATION, FL 33324	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent ROSENTHAL, ALEX P 2115 NORTH COMMERCE PARKWAY WESTON, FL 33326		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable DATE, Registered Agent signature required when applicable DATE</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY- ST- ZIP	P KAUFMAN, STUART 150 NIGHTHAWK AVENUE PLANTATION, FL 33324	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <i>Stuart Kaufman</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		954-205-5607 <small>Office Daytime Phone #</small>



04252005 No Chg-P CR2E034 (10/03)

4. FET Number 20-0059141	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

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04/28/05-80046-012 150.00