


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jun 12, 2007 8:00 am**  
**Secretary of State**

05-14-2007 90084 004 \*\*\*150.00

**DOCUMENT # P04000136367**

1. Entity Name  
EXCELLENT CONSULTANT, CORP.



|  |  |
|--|--|
| Principal Place of Business<br>1701 W 62ND ST<br>HIALEAH, FL 33012 | Mailing Address<br>1701 W 62ND ST<br>HIALEAH, FL 33012 |
|--|--|

**DO NOT WRITE IN THIS SPACE**

66018827



04012007 No Chg-P CR2E034 (11/05)

|                             |                               |
|-----------------------------|-------------------------------|
| 4. FEI Number<br>20-1709614 | Applied For<br>Not Applicable |
|-----------------------------|-------------------------------|

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

MARTINEZ, JORGE E  
1701 W 62ND ST  
HIALEAH, FL 33012

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when registering) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

|  |  |
|--|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | PDST<br>MARTINEZ, JORGE E<br>1701 W 62ND ST<br>HIALEAH, FL 33012 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |
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| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *[Signature]* **6/4/07**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #