

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000167952

FILED
Feb 03, 2007
Secretary of State

Entity Name: DCF CAPITAL CONSULTING, INC.

Current Principal Place of Business:

PO BOX 7148
DELRAY BEACH, FL 334827148 US

New Principal Place of Business:

3300 NE 192ND STREET
1504
AVENTURA, FL 33180 US

Current Mailing Address:

PO BOX 7148
DELRAY BEACH, FL 334827148 US

New Mailing Address:

PO BOX 800934
AVENTURA, FL 33280 US

FEI Number: 20-4006411

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FEINGOLD, DOUGLAS C
1310 W. MAGNOLIA CIRCLE
DELRAY BEACH, FL 33445 US

Name and Address of New Registered Agent:

FEINGOLD, DOUGLAS C
3300 NE 192ND STREET
1504
AVENTURA, FL 33180 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: _____

02/03/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FEINGOLD, DOUGLAS C
Address: PO BOX 7148
City-St-Zip: DELRAY BEACH, FL 334827148 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FEINGOLD, DOUGLAS C
Address: PO BOX 800934
City-St-Zip: AVENTURA, FL 33280 US

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.

SIGNATURE: DOUGLAS FEINGOLD

P

02/03/2007

Electronic Signature of Signing Officer or Director

Date