

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 14, 2002 8:00 am**  
**Secretary of State**

05-14-2002 90277 036 \*\*\*150.00

DOCUMENT # P95000040377  
1. Entity Name Accounting & Management Consulting, Inc.  
17710 Long Ridge Rd, Tampa, FL 33647

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business 17710 Long Ridge Rd  
Suite, Apt. #, etc.  
3. Mailing Address Same  
Suite, Apt. #, etc. Same  
City & State Tampa, FL  
City & State Same  
Zip 33647 Country USA  
Zip Same Country Same

4. FEI Number 59-3315838  
Applied For  Not Applicable  
5. Certificate of Status Desired  \$8.75 Additional Fee Required

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7. Name and Address of Current Registered Agent  
Name John F. Rauback  
Street Address (P.O. Box Number is Not Acceptable) 17710 Long Ridge Rd.  
City Tampa FL Zip Code 33647

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.  
SIGNATURE John F. Rauback John F. Rauback  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)   
January Fee is \$150.00  
After May 15 Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP <u>P/T/IS</u> <u>John F. Rauback</u> <u>17710 Long Ridge Rd</u> <u>Tampa, FL 33647</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or on an attachment with an address, with all other like empowers.

SIGNATURE: John F. Rauback John F. Rauback 4-25-02 (813) 503-7334  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #  
President

CR2E034B (12/01)