


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 23, 2006 08:00 AM
Secretary of State

DOCUMENT # P98000033042

1. Entity Name
A.J.A. CONSULTING, INC.



Principal Place of Business 2790 LOMOND DRIVE PALM HARBOR, FL 34684	Mailing Address 2790 LOMOND DRIVE PALM HARBOR, FL 34684
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05162006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3503873	Applied For Not Applicable
6. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**AGUIS, ANTHONY J
 2790 LOMOND DRIVE
 PALM HARBOR, FL 34684**

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 reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00
 Due by September 8, 2006**

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD AGUIS, ANTHONY J 2790 LOMOND DRIVE PALM HARBOR, FL 34684
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVD AGUIS, BARBARA 2790 LOMOND DRIVE PALM HARBOR, FL 34684
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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: *Anthony J. Aguis* **Anthony J. Aguis, President** Date **5/23/06** Daytime Phone # **(727) 787-4141**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR