

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 22, 2006 8:00 am
Secretary of State

05-22-2006 90040 050 ***150.00

DOCUMENT # P99000052603 1. Entity Name HEALTH INFORMATION CONSULTANT, INC.					
Principal Place of Business 3200 PALM TRACE LANDINGS DR # 916 DAVIE, FL 33314			Mailing Address 3200 PALM TRACE LANDINGS DR # 916 DAVIE, FL 33314		
2. Principal Place of Business 4728 NW 49th Court			3. Mailing Address 4728 NW 49th Court		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State Tamarac, FL			City & State Tamarac, FL		
Zip 33321		Country USA		Zip 33321 33319	
Country USA		4. FEI Number 65-0926406			
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MCGRATH, CAROL M 3200 PALM TRACE LANDINGS DR # 916 DAVIE, FL 33314					
7. Name and Address of New Registered Agent Name McGrath, Carol M. Street Address (P.O. Box Number is Not Acceptable) 4728 NW 49th Court City Tamarac FL 33321 33319					
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 <u><i>Carol M. McGrath</i></u> 5/17/06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)</small>					
FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	D <input type="checkbox"/> Delete MCGRATH, CAROL M 3200 PALM TRACE LANDINGS DR # 916 DAVIE, FL 33314				
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition McGrath, Carol M. 4728 NW 49th Court Tamarac, FL 33321 33319				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
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: <u><i>Carol M. McGrath</i></u> Carol M. McGrath 5/17/06 (954) 735-7721 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

40093551



05172006 Chg-P CR2E034 (11/05)

4. FEI Number
65-0926406
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

MCGRATH, CAROL M
3200 PALM TRACE LANDINGS DR
916
DAVIE, FL 33314

Name

McGrath, Carol M.

Street Address (P.O. Box Number is Not Acceptable)

4728 NW 49th Court

City

Tamarac

FL

Zip Code

33321 33319

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SIGNATURE

Carol M. McGrath

(NOTE: Registered Agent signature required when reinstating.)

DATE

5/17/06

**FILE NOW!!! FEE IS \$150.00
Due by September 6, 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

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SIGNATURE: *Carol M. McGrath* **Carol M. McGrath**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5/17/06 (954) 735-7721