


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90421 038 ***150.00

DOCUMENT # P00000042531		
1. Entity Name J.L.C. CONSULTATION GROUP, INC.		

Principal Place of Business 555 NE 15TH STREET 24 C MIAMI, FL 33132	Mailing Address 555 NE 15TH STREET 24 C MIAMI, FL 33132
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2. Principal Place of Business 1990 SW 27 AVE Suite, Apt. #, etc. 3RD FLOOR	3. Mailing Address 1990 SW 27 AVE Suite, Apt. #, etc. 3RD FLOOR
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City & State MIAMI, FLORIDA	City & State MIAMI, FLA.
Zip 33145	Country U.S.

14014557



04282005 Chg-P CR2E034 (10/03)

4. FEI Number 65-1014359	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent CUETO, JORGE L 1990 S.W. 27TH AVENUE THIRD FLOOR MIAMI, FL 33145	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

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	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)	DATE
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FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST CUETO, JORGE L 1990 S.W. 27TH AVENUE THIRD FLOOR MIAMI, FL 33145 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CUETO, JORGE L 1990 S.W. 27TH AVENUE THIRD FLOOR MIAMI, FL 33145 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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>Jorge Cueto</u>	Date <u>4-27-05</u>	Daytime Phone #
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