

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000004912

Entity Name: GARRIQUES CONSULTING, INC.

FILED
Jan 18, 2006
Secretary of State

Current Principal Place of Business:

557 CARO CT.
NEW SMYRNA BEACH, FL 32168

New Principal Place of Business:

103 N. ORANGE ST.
NEW SMYRNA BEACH, FL 32168

Current Mailing Address:

557 CARO CT.
NEW SMYRNA BEACH, FL 32168

New Mailing Address:

103 N. ORANGE ST.
NEW SMYRNA BEACH, FL 32168

FEI Number: 58-2366696

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARRIQUES, MICHAEL B
557 CARO CT.
NEW SMYRNA BEACH, FL 32168 US

Name and Address of New Registered Agent:

GARRIQUES, MICHAEL B
103 N. ORANGE ST.
NEW SMYRNA BEACH, FL 32168 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:

01/18/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GARRIQUES, MICHAEL
Address: 557 CARO CT.
City-St-Zip: NEW SMYRNA BEACH, FL 32168

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GARRIQUES, MICHAEL
Address: 103 N. ORANGE ST.
City-St-Zip: NEW SMYRNA BEACH, FL 32168

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: MICHAEL B. GARRIQUES

PRES

01/18/2006

Electronic Signature of Signing Officer or Director

Date