

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F07000004933

FILED
May 01, 2009
Secretary of State**Entity Name:** ALTAMONTE CONSULTING GROUP, INC.**Current Principal Place of Business:**1816 VICKSBURG WAY
ORLANDO, FL 32807**New Principal Place of Business:**9156 LAKE AVON DR
ORLANDO, FL 32829**Current Mailing Address:**1816 VICKSBURG WAY
ORLANDO, FL 32807**New Mailing Address:**9156 LAKE AVON DR
ORLANDO, FL 32829**FEI Number:** 26-0731409**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**PAGAN, RAMON
1816 VICKSBURG WAY
ORLANDO, FL 32807 US**Name and Address of New Registered Agent:**TERREFORTE, JUAN
9156 LAKE AVON DR
ORLANDO, FL 32829 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: JUAN TERREFORTE

05/01/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PSTD () Delete
Name: PAGAN, RAMON
Address: 1816 VICKSBURG WAY
City-St-Zip: ORLANDO, FL 32807**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PSTD (X) Change () Addition
Name: TERREFORTE, JUAN
Address: 9156 LAKE AVON DR
City-St-Zip: ORLANDO, FL 32829

I hereby certify that the information supplied with this filing does not qualify 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: JUAN TERREFORTE

PSTD

05/01/2009

Electronic Signature of Signing Officer or Director

Date