2005 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # G26450

1. Entity Name
CONSUTEC, INC.

Principal Place of Business	Mailing Address
7901 BENJAMIN ROAD TAMPA, FL 33634 US	7901 BENJAMIN ROAD TAMPA, FL 33634 US

DO NOT WRITE IN THIS SPACE

02282005   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
59-2269651	Not Applicable

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

6. Name and Address of Current Registered Agent

RAY OCHOTORENA
7901 BENJAMIN ROAD
TAMPA, FL 33634

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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

FILE NOW!!! FEE IS $150.00 **After May 1, 2005 Fee will be $550.00**	**9.** Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	

10.   OFFICERS AND DIRECTORS

TITLE	PDT
NAME	OCHOTORENA, RAY
STREET ADDRESS	7200 FLOWERFIELD DR.
CITY-ST-ZIP	TAMPA, FL
TITLE	VSD
NAME	KRAWCZYK
STREET ADDRESS	13147 GREENGAGE LN.
CITY-ST-ZIP	TAMPA, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: _RAy OCHOTORENA_   3/7/05   813-8897181

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #