2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G97271

FILED Apr 23, 2007 Secretary of State

Entity Name: A & M MANAGEMENT CONSULTANTS, INC.

Current Principal Place of Business: New Principal Place of Business:

128 N-DIXIE HWY 2125 HOLLYWOOD BOULEVARD

HOLLYWOOD, FL 33020 US HOLLYWOOD, FL 33020

Current Mailing Address: New Mailing Address:

2980 ABBOTTSWELL DR ALPHARETTA, GA 30022 US

FEI Number: 59-2400450 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LEVITT, PRESTON C ESQ LEVITT, PRESTON C ESQ 8211 W. BROWARD BLVD. 961 S.W. 88TH TERRACE PENTHOUSE 4 US PLANTATION, FL 33324 PLANTATION, FL 33324 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: 04/23/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

VPD

Title: () Delete Title: (X) Change () Addition MOLINARI, ANDY M., MOLINARI, ANDY M Name: Name: 2330 POLK ST #11 2444 POLK STREET #107 Address: Address:

HOLLYWOOD, FL 33020 City-St-Zip: HOLLYWOOD, FL 33020 City-St-Zip:

CD Title: (X) Change () Addition () Delete BRADY, ROBERT P., Name: Name: MOLINARI, MICHAEL J 447 OAK CREEK RD 3627 MCCLAREN WAY Address: Address: FRANKLIN, NC 28734 LAWRENCEVILLE, GA 30044 City-St-Zip: City-St-Zip:

Title: Title: TD () Delete TD (X) Change () Addition

BRADY, ANN B., BRADY, ANN B Name: Name: 447 OAK CREEK RD 447 OAK CREEK RD Address: Address: City-St-Zip: FRANKLIN, NC 28734 City-St-Zip: FRANKLIN, NC 28734

Title: () Delete Title: CD (X) Change () Addition

MOLINARI, VICKI L MOLINARI, VICKI L Name: Name: Address: 2980 ABBOTTSWELL DR Address: 2980 ABBOTTSWELL DR City-St-Zip: City-St-Zip: ALPHARETTA, GA 30022 ALPHARETTA, GA 30022

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: ANDY M. MOLINARI **PSD** 04/23/2007