2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2009
Secretary of State

DOCUMENT# H61729

Entity Name: CONSULIER ENGINEERING, INC.

Current Principal Place of Business:

2391 OLD DIXIE HWY
RIVIERA BEACH, FL 33404 US

New Principal Place of Business:

Current Mailing Address:

8295 N.MILITARY TRAIL
SUITE C
PALM BEACH GARDENS, FL 33420 US

New Mailing Address:

FEI Number: 59-2556878 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SIMON, ALAN R
8295 N.MILITARY TRAIL
SUITE C
PALM BEACH GARDENS, FL 33420 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	CD	( ) Delete
Name:	MOSLER, WARREN B	
Address:	5000 ESTATE SOUTHGATE	
City-St-Zip:	CHRISTIANSTED, VI 00820 US	
Title:	DST	( ) Delete
Name:	SIMON, ALAN R	
Address:	8295 N.MILITARY TRAIL	
City-St-Zip:	PALM BEACH GARDENS, FL 33420 US	
Title:	D	( ) Delete
Name:	SKENDER, FANI	
Address:	WALPISCH GASSE 14	
City-St-Zip:	VIENNA, 1010 AUSTRIA,	
Title:	D	( ) Delete
Name:	COMBIAS, JAMES	
Address:	77A SHERWOOD PLACE	
City-St-Zip:	GREENWICH, CT 06830	
Title:	D	( ) Delete
Name:	ANAUD, JEAN-PIERRE	
Address:	2106 FAIRWAY DRIVE S.	
City-St-Zip:	JUPITER, FL 33477 US	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: ALAN R. SIMON DST 01/07/2009

Electronic Signature of Signing Officer or Director Date