

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J20606

FILED
May 09, 2005
Secretary of State

Entity Name: THE CURTISS GROUP/OUTPLACEMENT CONSULTANTS OF MIAMI, INC.

Current Principal Place of Business:

2800 WESTON RD.
202
FT LAUDERDALE, FL 33331 US

New Principal Place of Business:

1555 NORTH PARK DRIVE
101
FT LAUDERDALE, FL 33326 US

Current Mailing Address:

2800 WESTON RD.
202
FT LAUDERDALE, FL 33331 US

New Mailing Address:

1555 NORTH PARK DRIVE
101
FT LAUDERDALE, FL 33326 US

FEI Number: 59-2681698

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COTLER, CRAIG
8751 W BROWARD BLVD-#305
PLANTATION, FL 33324 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SHINN, KARL
Address: 8105 SW 22 CT
City-St-Zip: DAVIE, FL 33324

Title: D () Delete
Name: SHINN, KARL,
Address: 2491-1 ARAGON BLVD
City-St-Zip: SUNRISE, FL 33322

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 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: KARL SHINN

PD

05/09/2005

Electronic Signature of Signing Officer or Director

_____ Date