2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# L67670

Entity Name: MRD CONSULTING, INC.

FILED Oct 05, 2006 Secretary of State

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

300 GRECO AVE. 299 ALHAMBRA CIRCLE

CORAL GABLES, FL 33146 SUITE 501 US

US

CORAL GABLES, FL 33134 US

Current Mailing Address: New Mailing Address:

299 ALHAMBRA CIRCLE 300 GRECO AVE CORAL GABLES, FL 33146

SUITE 501

CORAL GABLES, FL 33134 US

FEI Number: 65-0197764 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:

DELGADO, MARGARITA R PRESIDE DELGADO, MARGARITA R PRESIDE 299 ALHAMBRA CIRCLE

300 GRECO AVENUE CORAL GABLES, FL 33146 US SUITE 501

CORAL GABLES, FL 33134 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: 10/05/2006

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition PRFS () Delete Title: PRFS DELGADO, MARGARITA R PRESIDE DELGADO, MARGARITA R PRESIDE Name: Name: Address:

300 GRECO AVENUE Address: 299 ALHAMBRA CIRCLE, SUITE 501 City-St-Zip: CORAL GABLES, FL 33146 City-St-Zip: CORAL GABLES, FL 33134

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: MARGARITA R. DELGADO **PRES** 10/05/2006

Electronic Signature of Signing Officer or Director

Date