2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jun 12, 2007
Secretary of State

DOCUMENT# P00000003383

Entity Name: PULLEASE CONSULTING GROUP, INC.

Current Principal Place of Business:

51 VIA FIRENZA WAY
DAVIE, FL 33325

New Principal Place of Business:

Current Mailing Address:

51 VIA FIRENZA WAY
DAVIE, FL 33325

New Mailing Address:

FEI Number: 65-0975374 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

PULLEASE, DONALD
51 VIA FIRENZA WAY
DAVIE, FL 33325 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

OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete
Name: PULLEASE, DONALD E
Address: 51 VIA FIRENZA WAY
City-St-Zip: DAVIE, FL 33325

Title: D (X) Delete
Name: PULLEASE, BARBARA G
Address: 51 VIA FIRENZA WAY
City-St-Zip: DAVIE, FL 33325

Title: D ( ) Delete
Name: PULLEASE, CHRISTOPHER D
Address: 51 VIA FIRENZA WAY
City-St-Zip: DAVIE, FL 33325

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change ( ) Addition
Name: PULLEASE, CHRISTOPHER D
Address: 9721 NW 51 STREET
City-St-Zip: CORAL SPRINGS, FL 33076

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: DONALD E. PULLEASE PSTD 06/12/2007

Electronic Signature of Signing Officer or Director — Date