

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000020940

Entity Name: ROMADA CONSULTING CORP.

FILED  
Jan 06, 2005  
Secretary of State

**Current Principal Place of Business:**

6633 CASA GRANDE WAY  
DELRAY BEACH, FL 33446

**New Principal Place of Business:**

16386 MIRASOL WAY  
DELRAY BEACH, FL 33446

**Current Mailing Address:**

6633 CASA GRANDE WAY  
DELRAY BEACH, FL 33446

**New Mailing Address:**

16386 MIRASOL WAY  
DELRAY BEACH, FL 33446

FEI Number: 65-1023978

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BORNSTEIN, MARVIN T  
2138 HOLLYWOOD BLVD  
HOLLYWOOD, FL 33020 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: D ( ) Delete  
Name: MICHELSON, ALAN P  
Address: 6633 CASA GRANDE WAY  
City-St-Zip: DELRAY BEACH, FL 33446

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: MICHELSON, ALAN P  
Address: 16386 MIRASOL WAY  
City-St-Zip: DELRAY BEACH, FL 33446

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: ALAN P. MICHELSON

D

01/06/2005

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date