

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000021286

Entity Name: HEX CONSULTING, INC.

FILED
Apr 25, 2005
Secretary of State

Current Principal Place of Business:

7049 MARIPOSA CIRCLE WEST
PEMBROKE PINES, FL 33331

New Principal Place of Business:

2699 STIRLING ROAD
SUITE A-305
FT LAUDERDALE, FL 33312

Current Mailing Address:

7049 MARIPOSA CIRCLE WEST
PEMBROKE PINES, FL 33331

New Mailing Address:

2699 STIRLING ROAD
SUITE A-305
FT LAUDERDALE, FL 33312

FEI Number: 65-0986063

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIBERMAN, LEA
2699 STIRLING ROAD
SUITE A-305
FT. LAUDERDALE, FL 33312 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: PD () Delete
Name: LIBERMAN, AMIR
Address: 7049 MARIPOSA CIRCLE WEST
City-St-Zip: PEMBROKE PINES, FL 33331

Title: STD () Delete
Name: LIBERMAN, LEA
Address: 7049 MARIPOSA CIRCLE WEST
City-St-Zip: PEMBROKE PINES, FL 33331

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LIBERMAN, AMIR
Address: 2699 STIRLING ROAD, SUITE A-305
City-St-Zip: FT LAUDERDALE, FL 33312

Title: STD (X) Change () Addition
Name: LIBERMAN, LEA
Address: 2699 STIRLING ROAD, SUITE A-305
City-St-Zip: FT LAUDERDALE, FL 33312

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: LEA LIBERMAN

STD

04/25/2005

Electronic Signature of Signing Officer or Director

Date