2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000022480

15403 SW 68TH LANE

MIAMI, FL 33193

Address:

City-St-Zip:

Entity Name: TOTAL SERVICES CONSULTING, INC.

FILED Jan 09, 2006 Secretary of State

Littly Nai	ile. TOTAL	SERVICES CONSOLTING, INC				
Current P	rincipal Plac	e of Business:	New Prince	New Principal Place of Business:		
15403 SOU MIAMI, FL	JTHWEST 68 33193	TH LANE				
Current M	lailing Addre	ss:	New Mailing Address:			
15403 SOU MIAMI, FL	JTHWEST 68 33193	TH LANE				
FEI Number:	: 65-0987910	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
SILVA, MA 15403 SW MIAMI, FL	68TH LN		ARIAS, DA 15403 SW MIAMI, FL	68TH LN		
	named entity e of Florida.	submits this statement for the p	ourpose of changing i	ts registered o	ffice or registered agent, or both,	
SIGNATUR	RE: DANILO	ARIAS			01/09/2006	
	Electro	nic Signature of Registered Age	ent		Date	
Election Car	npaign Financir	ng Trust Fund Contribution ().				
OFFICERS	S AND DIREC	CTORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	ARIAS, DANIL	WEST 68TH LANE	Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	SILVA, MAYLİI	WEST 68TH LANE	Title: Name: Address: City-St-Zip:	RUIZ, ALEJANI	VEST 68TH LANE	
Title: Name: Address: City-St-Zip:	M (X MERINO, MAR 15403 SW 68 MIAMI, FL 33	TH LN	Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title:	M ()	() Delete	Title:	()	Change () Addition	

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.

Address:

City-St-Zip:

GIONATOILE DANIES ANIAS	PD	01/09/2006
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