

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000022480

FILED
Mar 10, 2009
Secretary of State

Entity Name: TOTAL SERVICES CONSULTING, INC.

Current Principal Place of Business:

1101 BRICKELL AVENUE
MIAMI, FL 33131

New Principal Place of Business:

105 W 86 ST
NEW YORK, NY 10024

Current Mailing Address:

1101 BRICKELL AVENUE
MIAMI, FL 33131

New Mailing Address:

6538 COLLINS AVE #386
MIAMI BEACH, FL 33141

FEI Number: 65-0987910

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MERINO, MARIA A
1101 BRICKELL AVENUE
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

COLMENARES, ANDREINA
1101 BRICKELL AVENUE
MIAMI, FL 33131 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: ANDREINA COLMENARES

03/10/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ARNAUD, DANTE
Address: 1101 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131 US

Title: M () Delete
Name: KRAFT, ALEXANDER B
Address: 1101 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33193 US

Title: M () Delete
Name: MERINO, MARIA A M
Address: 1101 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131 US

Title: VP () Delete
Name: RUIZ, ALEJANDRO J
Address: 1101 BRICKELL AVE
City-St-Zip: MIAMI, FL 33131 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: RUIZ, ALEX
Address: 1101 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131 US

Title: VP (X) Change () Addition
Name: COLMENARES, ANDREINA
Address: 1101 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33193 US

Title: M (X) Change () Addition
Name: ARIAS, DAN
Address: 1101 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131 US

Title: S (X) Change () Addition
Name: MERINO, MARIA
Address: 1101 BRICKELL AVE
City-St-Zip: MIAMI, FL 33131 US

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: DAN ARIAS

M

03/10/2009

Electronic Signature of Signing Officer or Director

Date