## 2006 FOR PROFIT CORPORATION

## ANNUAL REPORT

DOCUMENT # P00000091909

LOUIS BLAIOTTA CONSULTING SERVICES INC.



**FILED** Jan 31, 2006 08:00 AM **Secretary of State** 

Principal Place of Business

SIGNATURE:

13 CAYMAN PLACE PALM BEACH GARDENS, FL 33418 Mailing Address

**13 CAYMAN PLACE** 

PALM BEACH GARDENS, FL 33418



Jan. 22,2006 561-622-7381

## DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/05) 01182006 No Cha-P

4. FEI Number 22-3759938

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BLAIOTTA, LOUIS 13 CAYMAN PLACE PALM BEACH GARDENS, FL 33418

## DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE						
Signature, typed or profed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when rematating)  DATE						
FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financ Trust Fund Cantribution.	ing .	\$5.00 May Be Added to Fees	000000412058 02/10/06-30029-025 150.00	
10.	OFFICERS AND DIREC	CTORS			·	
name Sireei address City-St-Zip	D. BLAIOTTA, LOUIS 13 CAYMAN PLACE PALM BEACH GARDENS, FL 23418					
TITLE NAME STREET ADDRESS CITY -ST -ZIP	,		DO NOT WRITE IN THIS SPACE			
title Name Street address City-St-Zip						
title Name Sireet Address City-St-Zip						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
HITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this reportior supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an autoress, with all other like empowered.						