

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000093412

Entity Name: CAPITAL CONSULTING, INC.

FILED
Jul 07, 2008
Secretary of State

Current Principal Place of Business:

87 TROPICAL AVE.
WEST PALM BEACH, FL 33415

New Principal Place of Business:

Current Mailing Address:

PO BOX 83-2085
DELRAY BEACH, FL 33483

New Mailing Address:

FEI Number: 65-1045019

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SCHAFTLEIN, MARK D
87 TROPICAL AVE.
WEST PALM BEACH, FL 33415 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SCHAFTLEIN, MARK D
Address: 87 TROPICAL AVE
City-St-Zip: WEST PALM BEACH, FL 33415

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: SCHAFTLEIN, MARK D
Address: 87 TROPICAL AVE
City-St-Zip: WEST PALM BEACH, FL 33415

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: MARK SCHAFTLEIN

CEO

07/07/2008

Electronic Signature of Signing Officer or Director

Date