


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 20, 2006 8:00 am**  
**Secretary of State**

01-20-2006 90031 014 \*\*\*150.00

<b>DOCUMENT # P00000111319</b> 1. Entity Name DPR CONSULTING GROUP, INC.	
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Principal Place of Business 7621 124TH AVENUE UNIT C LARGO, FL 33773	Mailing Address 7621 124TH AVENUE UNIT C LARGO, FL 33773
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2. Principal Place of Business  Suite, Apt. #, etc.	3. Mailing Address PO Box 10204  Suite, Apt. #, etc.
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City & State	City & State	4. FEI Number 59-3684085	Applied For <input type="checkbox"/> Not Applicable
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Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>
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01172006 Chg-P CR2E034 (11/05)

<b>6. Name and Address of Current Registered Agent</b>  POPE, ROBERT 7621 124TH AVENUE UNIT C LARGO, FL 33773
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<b>7. Name and Address of New Registered Agent</b>  Name  Street Address (P.O. Box Number is Not Acceptable)  City <span style="float: right;"><b>FL</b> Zip Code</span>
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
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10. OFFICERS AND DIRECTORS	
TITLE	D <input type="checkbox"/> Delete POPE, ROBERT 7621 124TH AVENUE UNIT C LARGO, FL 33773
TITLE	D <input type="checkbox"/> Delete KULAK, DAVE 7621 124TH AVENUE UNIT C LARGO, FL 33773
TITLE	D <input type="checkbox"/> Delete BOUCHER, PAUL 7621 124TH AVENUE UNIT C LARGO, FL 33773
TITLE	<input type="checkbox"/> Delete
TITLE	<input type="checkbox"/> Delete
TITLE	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 report or 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 address, with all other like empowered.

SIGNATURE: Paul Boucher Paul K. Boucher 1/17/06 727 524-6139  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #