2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P00000117087

1. Entity Name
ACTION BROKERAGE CONSULTANTS, INC.

Principal Place of Business	Mailing Address
2215 TRADEPORT DR ORLANDO, FL 32824	2215 TRADEPORT DR ORLANDO, FL 32824

DO NOT WRITE IN THIS SPACE

03282008   No Chg-P   CR2E034 (11/05)

4. FEI Number 59-3690989	Applied For
	Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ROSENFELD, MICHAEL
2215 TRADEPORT DRIVE
ORLANDO, FL 32824

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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 _Michael Rosenfeld_   DATE 3/28/08

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U000000877561
04/14/08-80019-013 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	ROSENFELD, MICHAEL
STREET ADDRESS	2215 TRADEPORT DR
CITY-ST-ZIP	ORLANDO, FL 32824
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
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CITY-ST-ZIP	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: _Michael Rosenfeld_   3/28/08 (407) 447-7500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #