

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000060648

Entity Name: SLACHTER CONSULTING, INC.

FILED
Jan 21, 2008
Secretary of State

Current Principal Place of Business:

14830 DADE PINE AVENUE
MIAMI LAKES, FL 33014

New Principal Place of Business:

3340 N.E. 190 STREET
UNIT 901
AVENTURA, FL 33180

Current Mailing Address:

14830 DADE PINE AVENUE
MIAMI LAKES, FL 33014

New Mailing Address:

3340 N.E. 190 STREET
UNIT 901
AVENTURA, FL 33180

FEI Number: 65-1118978

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SLACHTER, DAVID
328 MINORCA AVENUE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

SLACHTER, DAVID
3340 N.E. 190 STREET
UNIT 901
AVENTURA, FL 33180 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: DAVID SLACHTER

01/21/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: SLACHTER, DAVID
Address: 14830 DADE PINE AVENUE
City-St-Zip: MIAMI LAKES, FL 33014

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: SLACHTER, DAVID
Address: 3340 N.E. 190 STREET
City-St-Zip: AVENTURA, FL 33180

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: DAVID SLACHTER

P/D

01/21/2008

Electronic Signature of Signing Officer or Director

Date