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| 005 FOR PROFIT CORPORATION ANNUAL REPORT | N | Mar 16, 2005 8:00 Secretary of Stat |
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| 4ENT # D04000064300 | THE STA | Secretary of Stat |

| | AITITUAL | KEFOKI | | | Secret | ary of State | |
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| DOCUMENT # P01000064398 | | | | 03-16-2005 90037 015 ***150.00 | | | |
| 1. Entity Nam | ę | | | | 03-16-200 | 3 9003 / 013 ****130.00 | |
| UNITED (| COMMUNITY CONSULTING | CORP. | | | | | |
| Principal Place | e of Business | Mailing Address | <u>_</u> | | | | |
| 3300 UNIVER | RSITY DR., STE. 405 | 3300 UNIVERSITY DR., S | TE. 405 | | | 50027286 | |
| CORAL SPRIN | IGS, FL 33065 | CORAL SPRINGS, FL 330 | 065 | | | *************************************** | |
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| 2. Principal P | lace of Business | 3. Mailing Address | Co-0 / | <u> </u> | | | |
| <u> 11784</u> | W. SAMPLE KOAD | | Ampris Ko | <u>49 </u> | 1184 - 111 - 2010 1184 - 241 - 241 - 2 | Brri Aessa attiri Elbes ilika 19161 jahlasi il 1961 | |
| Suite, Apt. | #, etc. | Suite, Apt. #Jetc. | | 03082 | 005 Chg-P | CR2E034 (10/03) | |
| City & State | e 0. 1 <i>C.</i> | City & State | | . 4. FEI 1 | Number | Applied For | |
| CORAL | , rpaings fc | CORAL SPRI | Nes F | 1 1 | 1116430 | Not Applicable | |
| 3306 | Country | 33065 egistered Agent | Country | 5. Cert | ficate of Status Desired | \$8.75 Additional | |
| 3300 | 6. Name and Address of Current R | 33007 | <u> Atu</u> | | e and Address of New | Fee Required | |
| | : The | edistaing whalit | Name | - | | negistered Agent | |
| | 3, ANDREW | | | JAREN | MORBERG | | |
| | ERSITY DR., STE. 405 PRINGS, FL. 33065 | | Street Add | oress (P.O. Box I | Number is Not Acceptable AMPUE | 100 ROAO | |
| OOITALOI | (MINOS, FE 33003 | | | 1 | | | |
| | | | CityCoA | AU SPI | elya? | FL 33065 | |
| | named entity submits this statement for ions of registered agent. | the purpose of changing its re | egistered office or re | egistered agent, | or both, in the State of F | orida. I am familiar with, and accept | |
| inc obligat | oria or registring again. | | | | 2/4/6 | n (* | |
| SIGNATURE_ | Signature, typed or printed name of registered egent an | d title if applicable. (NOTE: I | Registered Agent signature | required when reinsta | 37 / / \(\frac{1}{2}\) | DATE | |
| | | | | | ···· 3 , | | |
| | E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00 | 9. Election Campaig Trust Fund Contrib | ~ — | \$5.00 May Added to Fee: | | | |
| 10. | OFFICERS AND C | IRECTORS | 11. | ADDIT | IONS/CHANGES TO OF | FICERS AND DIRECTORS IN 11 | |
| TITLE | HOSEREDO ANDREM | ☐ Delete | TITLE | 5 2 | | Change 🔲 Addition | |
| NAME STREET ADDRESS | MOSBERG, ANDREW 3300 UNIVERSITY DR., STE. 405 | | NAME STREET ADDRESS | 11784 | W. samp | LT DOAD | |
| CITY-ST-ZIP | CORAL SPRINGS, FL 33065 | | CITY-ST-ZIP | COAAL | CPA INGS | it ROAO FL 33065 | |
| TITLE | Р | ☐ Delete | TITLE | <u> </u> | 41/2/ | Change | |
| NAME | SOLOMON, HOWARD | | NAME | | | 1 1 | |
| STREET ADDRESS CITY-ST-ZIP | 3300 UNIVERSITY DR., STE. 405 CORAL SPRINGS, FL. 33065 | | STREET ADDRESS CITY-ST-ZIP | 11784 | | LE ROAD | |
| TITLE | CONTROL NINGO, TE 33503 | ☐ Deloto | TITLE | CORAI | ~ 14/41401) | FL 33065 | |
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| STREET ADDRESS CITY-ST-ZIP | · | | STREET ADDRESS | | | | |
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| NAME | | ☐ Delete | TITLE NAME | | | ☐ Change ☐ Addition | |
| STREET ADDRESS | | | STREET ADDRESS | | | | |
| CITY-ST-ZIP | <u> </u> | | CITY-ST-ZIP | | | | |
| 12. I hereby a indicated | certify that the information supplied with I I on this report or supplemental report is i | his filing does not qualify for target and that my | he exemption state | d in Section 119 | .07(3)(i), Florida Statutes | s. I further certify that the information or oath; that I am an officer or director | |
| of the co | poration or the receiver or trustee empor | vered to execute this report a | s required by Chap | ter 607, Florida | Statutes; and that my na | re oath; that I am an officer or director me appears in Block 10 or Block 11 if | |
| changed | | | | | | | |