2005 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 27, 2005 08:00 AM Secretary of State **DOCUMENT # P01000081537** 1. Entity Name RKB CONSULTING, INC. Principal Place of Business Mailing Address 911 W. COUNTRY CLUB CIRCLE 911 W. COUNTRY CLUB CIRCLE PLANTATION, FL 33317 PLANTATION, FL 33317 No Chg-P CR2E034 (10/03) 01202005 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1133087 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BELDON, RENA K DO NOT WRITE 911 W. COUNTRY CLUB CIRCLE PLANTATION, FL 33317 IN THIS SPACE 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) Signature, typed or printed name of registered agont and title if applicable. **\$5.00** May Be Election Campaign Financing U00000199326 FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 01/27/05-80087-025 150.00 OFFICERS AND DIRECTORS 10. TITLE BELDON, RENA K NAME 911 W. COUNTRY CLUB CIRCLE STREET ADDRESS CITY-ST-ZIP PLANTATION, FL 33317 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

FILED

I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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.

SIGNING OFFICER OR DIRECTOR

CITY-ST-ZIP

SIGNATURE: