

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 14, 2004 8:00 am
Secretary of State

04-14-2004 90063 027 ***158.75

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1. Entity Name

PEAK MANAGEMENT CONSULTANCY, INC.



Principal Place of Business

1156 EAST TENNESSEE ST.
TALLAHASSEE FL 32308

Mailing Address

1156 EAST TENNESSEE ST.
TALLAHASSEE FL 32308

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

90-0007357

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required



MOORE

CR2E034 (11/03)

6. Name and Address of Current Registered Agent

MANZI, MERLE
3044 HAWKS LANDING DR.
TALLAHASSEE FL 32309

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE VD ☐ Delete
NAME MANZI, MERLE
STREET ADDRESS 3044 HAWKS LANDING DR.
CITY-ST-ZIP TALLAHASSEE FL 32309

TITLE TD ☐ Delete
NAME BARTZER, CHRISTINE
STREET ADDRESS 1925 ASCENSION WAY
CITY-ST-ZIP TALLAHASSEE FL 32308

TITLE SD ☐ Delete
NAME VISSARI, SUSAN
STREET ADDRESS 20484 SUMMER SONG LANE
CITY-ST-ZIP GERMANTOWN MD 20874

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☒ Change ☐ Addition
NAME VISSARI, SUSAN
STREET ADDRESS 17300 STAG HORN COURT
CITY-ST-ZIP GERMANTOWN, MD 20874

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing 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.

SIGNATURE:

Christine Bartzer - Christine Bartzer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/13/04

Date

850.201.3959

Daytime Phone #