

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000020142

FILED
Apr 07, 2005
Secretary of State

Entity Name: COLCONSULTING CORPORATION

Current Principal Place of Business:

2954 CANDELA CT.
APOPKA, FL 32703

New Principal Place of Business:

Current Mailing Address:

2954 CANDELA CT.
APOPKA, FL 32703

New Mailing Address:

FEI Number: 75-3019372

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROJAS, OSCAR
691 ASHFORD OAK DR. E
#205
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

ROJAS, OSCAR
2954 CANDELA CT.
APOPKA, FL 32703 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: OSCAR ROJAS

04/07/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SANCHEZ, BERNARDO
Address: CALLE 131 #9B-39
City-St-Zip: BOGOTA COLOMBIA,

Title: VD () Delete
Name: ALVAREZ, MARIA I
Address: CALLE 131 #9B-39
City-St-Zip: BOGOTA COLOMBIA,

Title: TD () Delete
Name: ALVAREZ, MARIA C
Address: 8518 BEAUFORT DR. 20759-9632
City-St-Zip: FULTON, MD

Title: SD () Delete
Name: DECLARIS, MARIA C
Address: 8518 BEAUFORT DR. 20759-9632
City-St-Zip: FULTON, MD

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARIA ISABEL ALVAREZ

VD

04/07/2005

Electronic Signature of Signing Officer or Director

Date