

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000021379

Entity Name: NOMADE CONSULTING INC

FILED  
Apr 22, 2007  
Secretary of State

**Current Principal Place of Business:**

230 NE 107 STREET  
MIAMI SHORES, FL 33161

**New Principal Place of Business:**

**Current Mailing Address:**

230 NE 107 STREET  
MIAMI SHORES, FL 33161

**New Mailing Address:**

FEI Number: 37-1421660

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BENJELLOUN, HASSAN  
230 NE 107 STREET  
1  
MIAMI SHORES, FL 33161 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: BENJELLOUN, HASSAN  
Address: 230 NE 107 STREET  
City-St-Zip: MIAMI SHORES, FL 33161

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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: HASSAN BENJELLOUN

D

04/22/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date