

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2005 8:00 am
Secretary of State

03-28-2005 90047 001 ***150.00

DOCUMENT # P02000023774 1. Entity Name C.F. CONSULTING SERVICES, INC.					
Principal Place of Business 4520 SW 68TH CT CIR #6 MIAMI, FL 33155			Mailing Address 4520 SW 68TH CT CIR #6 MIAMI, FL 33155		
2. Principal Place of Business 1362 HARBOR VIEW W HOLLYWOOD		3. Mailing Address 1362 HARBOR VIEW W HOLLYWOOD			
Suite, Apt. #, etc. HOLLYWOOD		Suite, Apt. #, etc. HOLLYWOOD			
City & State FLORIDA		City & State FLORIDA		4. FEI Number 74-3030986	
Zip 33019		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FEILBACH, CARLA A 4520 SW 68TH CT CIR #6 MIAMI, FL 33155			7. Name and Address of New Registered Agent Name FEILBACH, CARLA A. Street Address (P.O. Box Number is Not Acceptable) 1362 HARBOR VIEW W City HOLLYWOOD FL Zip Code 33019		
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 Carla A. Feilbach CARLA A. FEILBACH 3/25/05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE D	NAME FEILBACH, CARLA A		TITLE FEILBACH, CARLA A.		
STREET ADDRESS 4520 SW 68TH CT CIR #6	CITY-ST-ZIP MIAMI, FL 33155		NAME FEILBACH, CARLA A.		
CITY-ST-ZIP MIAMI, FL 33155			STREET ADDRESS 1362 HARBOR VIEW W		
			CITY-ST-ZIP HOLLYWOOD, FL 33019		
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: Carla A. Feilbach CARLA A. FEILBACH 3/25/05 305-773-5054 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					