## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000026821

Entity Name: PUBLIC HEALTH CONSULTING, INC.

FILED May 01, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Jurrent Principal Place of Business:	New Principal Place of Business:

12601 NORTHWEST 27TH AVENUE 2589 CENTERGATE DR. SUITE 201 SUITE 206

MIAMI, FL 33167 MIRAMAR, FL 33025

Current Mailing Address: New Mailing Address:

12601 NORTHWEST 27TH AVENUE 2589 CENTERGATE DR. SUITE 201 SUITE 206 MIRAMAR, FL 33167 MIRAMAR, FL 33025

FEI Number: 04-3615498 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete Title: PSTD (X) Change ( ) Addition

Name: RUINDANA, EGIDE Name: RUINDANA, EGIDE
Address: 12601 NORTHWEST 7TH AVENUE SUITE 201 Address: 2589 CENTERGATE DR. #206

City-St-Zip: MIAMI, FL 33167 City-St-Zip: MIRAMAR, FL 33025

 $\label{eq:title:V} {\sf Title:} \qquad {\sf V} \qquad {\sf ( ) Delete} \qquad \qquad {\sf Title:} \qquad {\sf V} \qquad {\sf (X) Change ( ) Addition}$ 

Name: KAMOSO, PIE Name: KAMOSO, PIE

 Address:
 18465 22 AVE. APT. 505
 Address:
 2589 CENTERGATE DR. #206

 City-St-Zip:
 NORTH MIAMI BEACH, FL 33160
 City-St-Zip:
 MIRAMAR, FL 33025

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: PIE KAMOSO V 05/01/2004