2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000035229

Entity Name: CAM HI CONSULTANTS, INC.

FILED Sep 04, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1002 MCDANIEL CREEK CT. OVIEDO, FL 32765 **Current Mailing Address: New Mailing Address:** 1002 MCDANIEL CREEK CT OVIEDO, FL 32765 FEI Number: 82-0538917 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JACQUELINE, DANZER JACQUELINE, DANZER 10151 UNIVERSITY BLVD #127 164 S SEMORAN BLVD. US ORLANDO, FL 32817 ORLANDO, FL 32807 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: 09/04/2005 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition CAMCHONG, ANGEL Name: Name: 1002 MCDANIEL CREEK CT Address: Address: OVIEDO, FL 32765 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition HI, MARIANA Name: Name: 1002 MCDANIEL CREEK CT Address: Address: OVIEDO, FL 32765 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition CAMCHONG, MARIO-ANGEL Name: Name: 1002 MCDANIEL CREEK CT Address: Address: City-St-Zip: OVIEDO, FL 32765 City-St-Zip: Title: () Delete Title: () Change () Addition CAMCHONG, MARIO-ANDRES Name: Name: Address: 1002 MCDANIEL CREEK CT Address: City-St-Zip: OVIEDO, FL 32765 City-St-Zip: Title: Title: () Delete () Change () Addition CAMCHONG, MARI A Name: Name: 1002 MCDANIEL CREEK CT Address: Address: City-St-Zip: OVIEDO, FL 32765 City-St-Zip: Title: () Delete Title: () Change () Addition CAMCHONG, MARIO-ANTONIO Name: Name: 1002 MCDANIEL CREEK CT Address: Address: City-St-Zip: City-St-Zip: OVIEDO, FL 32765

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: MARIANA CAMCHONG V 09/04/2005