

FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)

7A-2003

FILED  
Mar 05, 2003 8:00 am  
Secretary of State

03-05-2003 90035 032 \*\*\*158.75

DOCUMENT # P02000048317

1. Entity Name

CONSULTING SERVICES OF AMERICA, INC.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business C/O. R. MARQUES  
1820 S.W. 104TH. AVE.

3. Mailing Address

(SAME)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI- FL

City & State

-

Zip

33165

Country

U.S.A.

Zip

-

Country

-

4. FEI Number

04-3660444

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

RAFAEL C. MARQUES

Street Address (P.O. Box Number is Not Acceptable)

1820 S.W. 104TH. AVE.

City

MIAMI

FL

Zip Code

33165

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

Rafael C. Marques. (RAFAEL C. MARQUES), TREAS. - MARCH 3, 2003

Signature, typed or printed name of registered agent and date if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution.



**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PRESIDENT, TREASURER, SEC. & DIRECTOR  
NAME RAFAEL C. MARQUES  
STREET ADDRESS 1820 S.W. 104TH. AVE.  
CITY-ST-ZIP MIAMI, FL 33165

TITLE  
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IN THIS SPACE

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Rafael C. Marques, Pres. & Treas. - March 3, 2003 (305) 223-4191

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/02)

80046419

Rafael C. Marques, MBA, CFP

CERTIFIED FINANCIAL PLANNER  
BUSINESS & PERSONAL FINANCIAL PLANNING

3/2/03

PLEASE MAIL ME A  
BLANK FORM FOR THE  
CORP. INTANGIBLE TAX RETURN

THANK YOU,

By: Rafael C. Marques, Treas.  
CONSULTING SERVICES  
OF AMERICA, INC.  
C/O. RAFAEL C. MARQUES  
1820 S.W. 104TH AVE  
MIAMI, FL 33165  
TEL. (305) 223-4191