

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000058109

Entity Name: ALCOTT CONSULTING COMPANY

FILED  
Mar 11, 2007  
Secretary of State

## Current Principal Place of Business:

PO BOX 827271  
PEMBROKE PINES, FL 33082

## New Principal Place of Business:

1259 N.W. 170TH AVENUE  
PEMBROKE PINES, FL 33028

## Current Mailing Address:

PO BOX 827271  
PEMBROKE PINES, FL 33082

## New Mailing Address:

FEI Number: 75-3060116

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TAYLOR, KEITH  
701 PROMENADE DRIVE  
STE 109  
PEMBROKE PINES, FL 33026 US

## Name and Address of New Registered Agent:

TAYLOR, KEITH  
1259 NW 170TH AVENUE  
PEMBROKE PINES, FL 33028 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: KEITH O TAYLOR

03/11/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: TAYLOR, KEITH  
Address: 2221 CHARLESTON ST  
City-St-Zip: HOLLYWOOD, FL 33020

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: TAYLOR, KEITH  
Address: 1259 NW 170TH AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33028

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: KEITH O. TAYLOR

P

03/11/2007

Electronic Signature of Signing Officer or Director

Date