

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2003 8:00 am
Secretary of State

04-18-2003 90171 035 ***150.00

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DOCUMENT # P02000063878

1. Entity Name

ROUNDTABLE CONSULTING, INC.



Principal Place of Business

**152 SANTA BARBARA WAY
PALM BEACH GARDENS FL 33410**

Mailing Address

**152 SANTA BARBARA WAY
PALM BEACH GARDENS FL 33410**

2. Principal Place of Business

4587 Sanderling Circle
Suite, Apt. #, etc.

3. Mailing Address

4587 Sanderling Circle
Suite, Apt. #, etc.

City & State

Boynton Beach, Florida

City & State

Boynton Beach, FLORIDA

Zip
33436

Country
USA

Zip
33436

Country
USA

4. FEI Number

43-1980484

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**STEFFES, RAQUEL K
152 SANTA BARBARA WAY
PALM BEACH GARDENS FL 33410**

7. Name and Address of New Registered Agent

Name **Steffes, Raquel K**
Street Address (P.O. Box Number is Not Acceptable)

4587 Sanderling Circle
City **Boynton Beach** FL Zip Code **33436**

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 **Raquel K. Steffes, President**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

April 7, 2003
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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 **D** ☐ Delete
NAME **STEFFES, RAQUEL K**
STREET ADDRESS **152 SANTA BARBARA WAY**
CITY-ST-ZIP **PALM BEACH GARDENS FL 33410**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME **Steffes Raquel K**
STREET ADDRESS **4587 Sanderling Circle**
CITY-ST-ZIP **Boynton Beach, FL 33436**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
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CITY-ST-ZIP

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:

Raquel K. Steffes
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 7, 2003
Date

734 777-7717
Daytime Phone #

CR2E034 (10/02)