

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000076928

FILED
May 19, 2004
Secretary of State

Entity Name: RAS A/C MX CONSULTANT, INC.

Current Principal Place of Business:

19370 COLLINS AVE
APT 415C
SUNNYISLES, FL 33160

New Principal Place of Business:

P.O.BOX 22643
FT.LAUDRDALE, FL 33335

Current Mailing Address:

P.O.BOX 22643
FTLAUDERDALE, FL 33335

New Mailing Address:

FEI Number: 30-0099672

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMO, ROBERT
19370 COLLINS AVE
APT 415C
SUNNYISLES, FL 33160

Name and Address of New Registered Agent:

SIMO, ROBERT
P.O. BOX 22643
FT.LAUDERDALE, FL 33335

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: ROBERT SIMO

05/19/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSDT () Delete
Name: SIMO, ROBERT
Address: 19688 COUNTRY CLUB
City-St-Zip: AVENTURA, FL 33180

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSDT (X) Change () Addition
Name: SIMO, ROBERT
Address: P.O.BOX 22643
City-St-Zip: FT LAUDERDALE, FL 33335

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: ROBERT SIMO

PSDT

05/19/2004

Electronic Signature of Signing Officer or Director

Date