

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000080207

FILED
Apr 26, 2004
Secretary of State

Entity Name: BAB CONSULTING INCORPORATED

Current Principal Place of Business:

6210 NW 58TH WAY
PARKLAND, FL 33067

New Principal Place of Business:

13220 PECKY CYPRESS DRIVE
JACKSONVILLE, FL 32223

Current Mailing Address:

6210 NW 58TH WAY
PARKLAND, FL 33067

New Mailing Address:

13220 PECKY CYPRESS DRIVE
JACKSONVILLE, FL 32223

FEI Number: 04-3705518

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEAN, BARBARA A
6210 NW 58TH WAY
PARKLAND, FL 33067

Name and Address of New Registered Agent:

DEAN, BARBARA A
13220 PECKY CYPRESS DRIVE
JACKSONVILLE, FL 32223

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: BARBARA A. DEAN

04/26/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: DEAN, BARBARA A
Address: 6210 NW 58TH WAY
City-St-Zip: PARKLAND, FL 33067 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: DEAN, BARBARA A
Address: 13220 PECKY CYPRESS DRIVE
City-St-Zip: JACKSONVILLE, FL 32223 US

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: BARBARA A. DEAN

PRES

04/26/2004

Electronic Signature of Signing Officer or Director

Date