

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000105048

FILED
Apr 22, 2004
Secretary of State

Entity Name: C. P. A. CONSULTING, CORP.

Current Principal Place of Business:

1560 SAWGRASS CORPORATE PARKWAY
#400
SUNRISE, FL 33323

New Principal Place of Business:

406 LAKE VIEW DR.
#102
WESTON, FL 33326

Current Mailing Address:

16700 SOUTH POST RD., #104
WESTON, FL 33331

New Mailing Address:

406 LAKE VIEW DR.
102
WESTON, FL 33326

FEI Number: 54-2076424

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SERVERMAX
1560 SAWGRASS CORPORATE PARKWAY
#450
SUNRISE, FL 33323 US

Name and Address of New Registered Agent:

SERVERMAX
1580 SAWGRASS CORPORATE PARKWAY
#130
SUNRISE, FL 33323 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:

04/22/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CRISTINA, GAVIRIA A
Address: 1560 SAWGRASS CORP., PKWY
City-St-Zip: SUNRISE, FL 33323 US

Title: D () Delete
Name: CARVAJAL TIGREROS, MAGALY
Address: 1560 SAWGRASS CORP., PKWY
City-St-Zip: SUNRISE, FL 33323

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CRISTINA, GAVIRIA A
Address: 406 LAKE VIEW DR. UNIT 102
City-St-Zip: WESTON, FL 33326 US

Title: D (X) Change () Addition
Name: CARVAJAL TIGREROS, MAGALY
Address: 406 LAKE VIEW DR. UNIT 102
City-St-Zip: WESTON, FL 33326

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: MAGALY CARVAJAL

D

04/22/2004

Electronic Signature of Signing Officer or Director

Date