

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000130341

FILED
Apr 29, 2004
Secretary of State

Entity Name: ROBERT HOFFMAN CONSULTING, INC.

Current Principal Place of Business:

1033 JACARANDA CIRCLE
ROCKLEDGE, FL 32955

New Principal Place of Business:

Current Mailing Address:

1033 JACARANDA CIRCLE
ROCKLEDGE, FL 32955

New Mailing Address:

FEI Number: 01-0758303

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERT, HOFFMAN
1033 JACARANDA CIRCLE
ROCKLEDGE, FL 32955 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR. () Change (X) Addition
Name: COOPER, STEVEN W PRESIDE
Address: 1901 N. ANDREWS AVENUE, #215
City-St-Zip: FT. LAUDERDALE, FL 33311 US

Title: MRS. () Change (X) Addition
Name: HOFFMAN, JOYCE C TREASUR
Address: 1033 JACARANDA CIRCLE
City-St-Zip: ROCKLEDGE, FL 32955 US

Title: MR. () Change (X) Addition
Name: HOFFMAN, ROBERT H SECRETA
Address: 1033 JACARANDA CIRCLE
City-St-Zip: ROCKLEDGE, FL 32955 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: ROBERT H. HOFFMAN

MR.

04/29/2004

Electronic Signature of Signing Officer or Director

_____ Date