2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000014458

Entity Name: EOP CONSULTING, INC.

PETERSON, ELAINE

WESTON, FL 33327

2589 JARDIN CT

Name:

Address: City-St-Zip: FILED Jan 19, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2589 JARDIN CT WESTON, FL 33327 **Current Mailing Address: New Mailing Address:** 2589 JARDIN CT WESTON, FL 33327 FEI Number: 56-2352829 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CIELENSKY, MICHAEL 2589 JARDIN CT WESTON, FL 33327 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition CIELENSKY, FRANK Name: Name: 7936 LEIGHTON COURT Address: Address: City-St-Zip: NEW PORT RICHEY, FL 34654 City-St-Zip: Title: Title: () Change () Addition () Delete CIELENSKY, MICHAEL Name: Name: 2589 JARDIN CT Address: Address: WESTON, FL 33327 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

Name:

Address:

City-St-Zip:

SIGNATURE: MICHAEL CIELENSKY VP 01/19/2009