

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000018965

Entity Name: ALLERGY CONSULTING SERVICES, INC.

FILED  
Feb 23, 2005  
Secretary of State

## Current Principal Place of Business:

14275 S.W. 96TH TERRACE  
MIAMI, FL 33186

## New Principal Place of Business:

345 NW 60TH AVE  
MIAMI, FL 33126

## Current Mailing Address:

14275 S.W. 96TH TERRACE  
MIAMI, FL 33186

## New Mailing Address:

345 NW 60TH AVENUE  
MIAMI, FL 33126

FEI Number: 16-1654811

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SABINA, RAQUEL  
14275 S.W. 96TH TERRACE  
MIAMI, FL 33186 US

## Name and Address of New Registered Agent:

SABINA, RAQUEL  
345 NW 60TH AVENUE  
MIAMI, FL 33126 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: RAQUEL SABINA

02/23/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SABINA, RAQUEL  
Address: 14275 S.W. 96TH TERRACE  
City-St-Zip: MIAMI, FL 33186

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SABINA, RAQUEL  
Address: 345 NW 60TH AVENUE  
City-St-Zip: MIAMI, FL 33126

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: RAQUEL SABINA

P

02/23/2005

Electronic Signature of Signing Officer or Director

Date