

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000025549

Entity Name: GMS CONSULTING GROUP, INC.

FILED  
May 19, 2009  
Secretary of State

## Current Principal Place of Business:

4970 SW 72ND AVE  
SUITE 104, 1ST FLOOR  
MIAMI, FL 33155

## New Principal Place of Business:

## Current Mailing Address:

4970 SW 72ND AVE  
SUITE 104, 1ST FLOOR  
MIAMI, FL 33155

## New Mailing Address:

FEI Number: 33-1046981

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

OVERMANN, LYNN ESQ  
1520 NORTH ROYAL POINCIANA BLVD.  
MIAMI SPRINGS, FL 33166 US

## Name and Address of New Registered Agent:

DAVID, CROUCH  
4970 SW 72ND AVE  
SUITE 104  
MIAMI, FL 33155 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: DAVID CROUCH

05/19/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( )

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MALDONADO, PATRICIA  
Address: 260 N.E. 17TH TERRACE, SUITE 200  
City-St-Zip: MIAMI, FL 33132

Title: D ( ) Delete  
Name: CAVENDISH, STEVE  
Address: 4970 SW 72ND AVE, STE 104  
City-St-Zip: MIAMI, FL 33155

Title: D ( ) Delete  
Name: LUCIEN, REGINALD  
Address: 9487 FOREST HILLS CIRCLE  
City-St-Zip: TAMPA, FL 33612

Title: D ( ) Delete  
Name: CROUCH, DAVID D  
Address: 1520 N. ROYAL POINCIANA BLVD.  
City-St-Zip: MIAMI SPRINGS, FL 33166

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: DAVID CROUCH

D

05/19/2009

Electronic Signature of Signing Officer or Director

Date