2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 12, 2006 08:00 AM Secretary of State

DOCUMENT # P03000073697 1. Entity Name BUSINESS EVOLUTION CONSULTING GROUP, INC.				. Section	ctary or State
Principal Place of Business Mailing Address 25 ISLAND DRIVE 5401 CENTRAL AVE TREASURE ISLAND, FL 33706 SAINT PETERSBURG, FL 3371		O	T STERVINES SAVINES HAVE ON A SEAS OF THE	EENH REEEE INIO EINE Inhi Joeres in 1834	
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E	OO NOT WRITE I	N THIS SPAC	CE	02012006 No Chg-P 4, FEI Number 20-0086325	CR2E034 (11/05) Applied for Not Applicable
}	The state of the s	The second secon		5. Certificate of Status Desired	\$8.75 Additional Fee Required
	6. Name and Address of Current Regi	stered Agent			
MCATEE, CAROL ACCOUNTING CONSULTANTS			-AK A STEELS ALL	DO NOT W	**
5401 CENTRAL AVENUE ST PETERSBURG, FL 33710			ag ay ay a a a	IN THIS SP	
					radionary of the second of
3. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature. bood or privide name of registered agent and this if applicable. [NOTE: Registered Agent signature required when reinstating) PATE FILE NOWILL FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees					
10.	OFFICERS AND DIRE	CTORS		water and the second	
TOTLE NAME STREET AUTOMESS	P WILLIAMS, LAURA 25 ISLAND DRIVE		e man y e men . e man e man u est	The second secon	
CHY-ST-ZIP	TREASURE ISLANO, FL 33706			المحمد ومسا وهوا ولأماء المتلقى الرواا المالية	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WANGLER, MARGARET M 25 ISLAND DRIVE TREASURE ISLAND, FL 33706	·			ACCUMENT
TITLE NAME				ment of the same within \$1000 and the	العالم المعامل المعامل المعامل المعامل المعام
SIRLEI ADDRESS City-SI-Zip			- Andrew Andrew	DO NOT W	RITE
TATLE NAME STREET ADDRESS CITY-ST-2IF			الای مستریس معاملات این ایندها این	IN THIS SP	
TITLE HAME STREET ADDRESS CITY-ST-ZIP			e e e e e e e e e e e e e e e e e e e	C. Prince and St. Co. Co.	
DITLE MARKE STRELT ADDRESS GITY-ST-ZIP				The second secon	anna (1904) anna 1904 agus ann ann ann an Aireann ann an Aireann ann ann an Aireann ann ann ann ann ann ann an Aireann ann ann ann ann ann ann ann ann ann
12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report of supplemental report is true and accurate and that my signature shall have the same legal effect as if made under path; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: Aura William LAURA WILLIAMS 4/1/2006 727.360-9089 BIONATURE AND TYPED OR PRINTED NAME OF STORNING DIFFICER OR DIRECTOR WILLIAMS 4/1/2006 727.360-9089					