

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000107939

Entity Name: DOGMA CONSULTING INC.

FILED
Apr 10, 2009
Secretary of State

Current Principal Place of Business:

1620 SOUTH OCEAN BLVD APT 14 M
POMPANO BEACH, FL 33062

New Principal Place of Business:

Current Mailing Address:

1620 SOUTH OCEAN BLVD APT 14 M
POMPANO BEACH, FL 33062

New Mailing Address:

FEI Number: 20-0284675

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARVEY, MICHAEL
1620 SOUTH OCEAN BLVD APT 14 M
POMPANO BEACH, FL 33062 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: P () Delete
Name: HARVEY, MICHAEL
Address: 1620 SOUTH OCEAN BLVD APT 14 M
City-St-Zip: POMPAN0 BEACH, FL 33062

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP () Change (X) Addition
Name: JOHNSON, DALIA
Address: 1699 BROOKLYN AVE
City-St-Zip: BROOKLYN, NY 11210 US

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: MICHAEL HARVEY

PRES

04/10/2009

Electronic Signature of Signing Officer or Director

Date