2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 01, 2004
Secretary of State

DOCUMENT# P03000139326

Entity Name: DIVINITUS MISERICORDIA LEGACYCONSULTING CORPORATION

Current Principal Place of Business:

6650 SW 118TH ST.
VILLAGE OF PINECREST, FL 33156 US

New Principal Place of Business:

17325 SOUTHWEST 84 COURT
VILLAGE OF PALMETTO BAY, FL 33157 US

Current Mailing Address:

6650 SW 118TH ST.
VILLAGE OF PINECREST, FL 33156 US

New Mailing Address:

17325 SOUTHWEST 84 COURT
VILLAGE OF PALMETTO BAY, FL 33157 US

FEI Number: 20-0520187 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

PARLAPIANO, DOMINICK C
6650 SW 118TH ST.
VILLAGE OF PINECREST, FL 33156 US

Name and Address of New Registered Agent:

PARLAPIANO, MAYRA A
17325 SOUTHWEST 84 COURT
VILLAGE OF PALMETTO BAY, FL 33157 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: MAYRA A. PARLAPIANO 09/01/2004
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: P ( ) Delete
Name: PARLAPIANO, DOMINICK C
Address: 6650 SW 118TH ST.
City-St-Zip: VILLAGE OF PINECREST, FL 33156 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: PARLAPIANO, MAYRA A
Address: 17325 SOUTHWEST 84 COURT
City-St-Zip: VILLAGE OF PALMETTO BAY, FL 33157 US

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: MAYRA A. PARLAPIANO PRES 09/01/2004
Electronic Signature of Signing Officer or Director Date