2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000157266

Entity Name: TURN INVESTMENT CONSULTANTS, INC.

FILED May 02, 2007 Secretary of State

US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

Current Principal Place of Business: New Principal Place of Business:

6896 SUNSET DR 625 GONDOLIERE AVE. MIAMI, FL 33143 CORAL GABLES, FL 33143

Current Mailing Address: New Mailing Address:

6896 SUNSET DR 625 GONDOLIERE AVE. MIAMI, FL 33143 CORAL GABLES, FL 33143

FEI Number: 14-1901092 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SPIEGEL & UTRERA, P.A.

1840 SW 22ND ST.

4TH FLOOR

MIAMI, FL 33145 US

GONAS, BOTHWELL C
625 GONDOLIERE AVE.
CORAL GABLES, FL 33143

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: BOTHWELL GONAS 05/02/2007

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: PSD ()Delete Title: P

 Name:
 ACKER, SCOTT
 Name:
 GONAS, BOTHWELL C

 Address:
 6896 SUNSET DR
 Address:
 625 GONDOLIERE AVE.

 City-St-Zip:
 MIAMI, FL 33143
 City-St-Zip:
 CORAL GABLES, FL 33143

Title: VTD (X) Delete Title: () Change () Addition
Name: GONAS_BOTHWELL Name:

 Name:
 GONAS, BOTHWELL
 Name:

 Address:
 6896 SUNSET DR
 Address:

 City-St-Zip:
 MIAMI, FL 33143
 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: BOTHWELL GONAS PD 05/02/2007