

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000042327

Entity Name: SBS CONSULTING, INC.

FILED
Feb 23, 2007
Secretary of State

Current Principal Place of Business:

1631 OAK KNOLL DRIVE
FT LAUDERDALE, FL 33324

New Principal Place of Business:

1631 E. OAK KNOLL CIRCLE
FT LAUDERDALE, FL 33324

Current Mailing Address:

1631 OAK KNOLL DRIVE
FT LAUDERDALE, FL 33324

New Mailing Address:

1631 E. OAK KNOLL CIRCLE
FT LAUDERDALE, FL 33324

FEI Number: 20-0877241

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHWEKY, BRUCE
1631 OAK KNOLL DRIVE
FT. LAUDERDALE, FL 33324 US

Name and Address of New Registered Agent:

SHWEKY, BRUCE
1631 E. OAK KNOLL CIRCLE
FT. LAUDERDALE, FL 33324 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: BRUCE SHWEKY

02/23/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SHWEKY, BRUCE
Address: 1631 OAK KNOLL DRIVE
City-St-Zip: FT LAUDERDALE, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SHWEKY, BRUCE
Address: 1631 E. OAK KNOLL CIRCLE
City-St-Zip: FT LAUDERDALE, FL 33324

I hereby certify that the information supplied with this filing does not qualify for the 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: BRUCE SHWEKY

D

02/23/2007

Electronic Signature of Signing Officer or Director

Date