


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90422 050 ***150.00

DOCUMENT # P04000058868 1. Entity Name A.W.J. CONSULTING, INC																											
Principal Place of Business 1 HARGROVE GRADE SUITE 1A PALM COAST, FL 32137		Mailing Address 1 HARGROVE GRADE SUITE 1A PALM COAST, FL 32137																									
2. Principal Place of Business X 1440 N. Nova Rd Suite, Apt. #, etc. Ste 305 City & State Holly Hill, FL Zip 32117		3. Mailing Address X 1440 N. Nova Rd Ste 305 Suite, Apt. #, etc. Holly Hill City & State FL Zip 32110																									
Country USA		Country USA																									
4. FEI Number 20-1215573		Applied For <input type="checkbox"/> Not Applicable																									
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent WEBER, ALFRED R JR 1 HARGROVE GRADE SUITE 1B PALM COAST, FL 32137		7. Name and Address of New Registered Agent Name X Alfred R Weber Jr Street Address (P.O. Box Number is Not Acceptable) 1440 N. Nova Rd Ste 305 Holly Hill City FL Zip Code 32117																									
8. 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 X Alfred R Weber Jr Alfred R Weber Jr DVP 4/30/06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																											
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																									
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">D</td> <td style="width:20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>WEBER, ALFRED R</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1 HARGROVE GRADE SUITE 1B</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>PALM COAST, FL 32137</td> <td></td> </tr> </table>		TITLE	D	<input type="checkbox"/> Delete	NAME	WEBER, ALFRED R		STREET ADDRESS	1 HARGROVE GRADE SUITE 1B		CITY-ST-ZIP	PALM COAST, FL 32137		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">Alfred R. Weber Jr</td> <td style="width:20%; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>Alfred R. Weber Jr</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1440 N. Nova Rd Ste 305</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>Holly Hill, FL 32117</td> <td></td> </tr> </table>		TITLE	Alfred R. Weber Jr	<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	Alfred R. Weber Jr		STREET ADDRESS	1440 N. Nova Rd Ste 305		CITY-ST-ZIP	Holly Hill, FL 32117	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered		SIGNATURE: X Alfred R Weber Jr Alfred R Weber Jr DVP 4/30/06 320-255-0889 <small>Signature and typed or printed name of signing officer or director Date Daytime Phone #</small>																									