

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000059836

FILED  
May 02, 2006  
Secretary of State

**Entity Name:** AUTHENTIC SELF INTUITIVE EXECUTIVE CONSULTING & HYPNOSIS INC.

**Current Principal Place of Business:**

13620 LAKE CAWOOD DR.  
WINDERMERE, FL 34786

**New Principal Place of Business:**

140 ISLAND WAY  
182  
CLEARWATER, FL 33767

**Current Mailing Address:**

13620 LAKE CAWOOD DR.  
WINDERMERE, FL 34786

**New Mailing Address:**

140 ISLAND WAY  
182  
CLEARWATER, FL 33767

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

SCOTT, NALITA  
13620 LAKE CAWOOD DR.  
WINDERMERE, FL 34786 US

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

SCOTT, NALITA  
140 ISLAND WAY  
182  
CLEARWATER, FL 33767 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: NALITA SCOTT

05/02/2006

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: CEO ( ) Delete  
Name: SCOTT, JACK  
Address: 13620 LAKE CAWOOD DR.  
City-St-Zip: WINDERMERE, FL 34786

Title: CFO ( ) Delete  
Name: SCOTT, NALITA  
Address: 13620 LAKE CAWOOD DR.  
City-St-Zip: WINDERMERE, FL 34786

Title: V ( ) Delete  
Name: SCOTT, WYATT  
Address: 13620 LAKE CAWOOD DR.  
City-St-Zip: WINDERMERE, FL 34786

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: CEO (X) Change ( ) Addition  
Name: SCOTT, JACK  
Address: 140 ISLAND WAY  
City-St-Zip: CLEARWATER, FL 33767

Title: CFO (X) Change ( ) Addition  
Name: SCOTT, NALITA  
Address: 140 ISLAND WAY  
City-St-Zip: CLEARWATER, FL 33767

Title: VP (X) Change ( ) Addition  
Name: SCOTT, WYATT  
Address: 140 ISLAND WAY  
City-St-Zip: CLEARWATER, FL 33767

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: NALITA SCOTT

CFO

05/02/2006

Electronic Signature of Signing Officer or Director

Date