2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000063688

FILED Feb 05, 2006 Secretary of State

Entity Name: BARBOSA CONSULTING, INC **Current Principal Place of Business: New Principal Place of Business:** 704 SATURN AVE SARASOTA, FL 342431730 **Current Mailing Address: New Mailing Address:** 704 SATURN AVE SARASOTA, FL 342431730 FEI Number: 20-1002801 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: BARBOSA, ANTONIO C 704 SATUŔN AVE SARASOTA, FL 342431730 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: Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: PVS (X) Change () Addition BARBOSA, JUREMA Name: Name: BARBOSA, ANTONIO 704 SATURN AVE 704 SATURN AVE Address: Address: City-St-Zip: SARASOTA, FL 342431730 City-St-Zip: SARASOTA, FL 342431730

Title: VS (X) Delete Title: () Change () Addition

 Name:
 BARBOSA, ANTONIO
 Name:

 Address:
 704 SATURN AVE
 Address:

 City-St-Zip:
 SARASOTA, FL 342431730
 City-St-Zip:

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: ANTONIO BARBOSA PVS 02/05/2006