



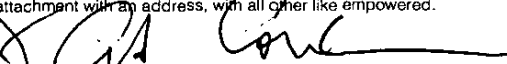
2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90440 039 ***150.00

DOCUMENT # P04000069360 1. Entity Name GIDEON INTERNATIONAL CONSULTING, INC.																													
Principal Place of Business 8211 SOUTHGATE BLVD N LAUDERDALE, FL 33068 US			Mailing Address 8211 SOUTHGATE BLVD N LAUDERDALE, FL 33068 US																										
2. Principal Place of Business 1107 BELMONT LANE Suite, Apt. #, etc.		3. Mailing Address 1107 BELMONT LANE Suite, Apt. #, etc.																											
City & State N LAUDERDALE FL		City & State N LAUDERDALE FL		4. FEI Number 68-0584617																									
Zip 33068		Country US		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent GRANSTON, CLIFFORD 8211 SOUTHGATE BLVD N LAUDERDALE, FL 33068				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																									
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____																													
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%;">NAME</td> <td style="width:20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>GRANSTON, CLIFFORD</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>8211 SOUTHGATE BLVD</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>N LAUDERDALE, FL 33068</td> <td></td> </tr> </table>			TITLE	NAME	<input type="checkbox"/> Delete	NAME	GRANSTON, CLIFFORD		STREET ADDRESS	8211 SOUTHGATE BLVD		CITY-ST-ZIP	N LAUDERDALE, FL 33068		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%;">NAME</td> <td style="width:20%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>1107 BELMONT LANE</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>N LAUDERDALE FL 33068</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>			TITLE	NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	1107 BELMONT LANE		STREET ADDRESS	N LAUDERDALE FL 33068		CITY-ST-ZIP		
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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: 
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-24-06 **954-868-7743**
 Date Daytime Phone #