2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000076689

Entity Name: BAHIA SHORES CONSULTING, INC.

SAINT PETERSBURG, FL 33710

City-St-Zip:

FILED Apr 30, 2008 Secretary of State

| Current Principal Place of Business: | | | New Principal Place | New Principal Place of Business: | |
|---|---|--------------------------------|--|--|--|
| 5113 CTRL AVE SAINT PETERSBURG, FL 33710 | | | 5113 CENTRAL AVE SAINT PETERSBURG | 5113 CENTRAL AVE SAINT PETERSBURG, FL 33710 | |
| Current M | lailing Addres | ss: | New Mailing Address: | | |
| 5113 CTRL AVE SAINT PETERSBURG, FL 33710 | | | 5113 CENTRAL AVE SAINT PETERSBURG, FL 33710 | | |
| FEI Number | : 14-1908422 | 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: | | |
| 5113 CEŃ SAINT PE | CHARLES TRAL AVE TERSBURG, F e named entity e of Florida. | | purpose of changing its registere | d office or registered agent, or both, | |
| SIGNATUI | RE: | | | | |
| | Electror | nic Signature of Registered Ag | ent | Date | |
| Election Car | mpaign Financin | g Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANG | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | GODELS, CHA 5113 CENTRAI | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: | S (MARGUERITE, 5113 CENTRAI | | Title: Name: Address: | () Change () Addition | |

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: CHARLES P. GODELS DPT 04/30/2008