

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000102460

Entity Name: 07 CONSULTING, INC.

FILED  
May 02, 2005  
Secretary of State

**Current Principal Place of Business:**

PO BOX 431273  
SOUTH MIAMI, FL 33243

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 431273  
SOUTH MIAMI, FL 33243

**New Mailing Address:**

FEI Number: 27-0096949

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DICION, KESHIA  
6250 SW 62 COURT  
MIAMI, FL 33143 US

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

DIXON, KESHIA  
6250 SW 62 COURT  
MIAMI, FL 33143 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: KESHIA DIXON

05/02/2005

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: DICI ( ) Delete  
Name: ON, KESHIA  
Address: 6250 SW 62 COURT  
City-St-Zip: MIAMI, FL 33143

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

Title: CEO (X) Change ( ) Addition  
Name: DIXON, KESHIA  
Address: 6250 SW 62 COURT  
City-St-Zip: MIAMI, FL 33143

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KESHIA DIXON

CEO

05/02/2005

Electronic Signature of Signing Officer or Director

Date