

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000102876

**FILED**  
**Apr 11, 2012**  
**Secretary of State**

**Entity Name:** SERVICE CONSOLIDATION INC.

**Current Principal Place of Business:**

1259 W ATLANTIC BLVD  
SUITE # 124  
POMPANO BCH, FL 33069

**New Principal Place of Business:**

1255 W ATLANTIC BLVD  
LOADING DOCK # 80  
POMPANO BCH, FL 33069

**Current Mailing Address:**

P.O. BOX 669111  
POMPANO BCH, FL 33066

**New Mailing Address:**

**FEI Number:** 05-0605553

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FRIEDLAND, PHILIP H CPA  
235 SE 5TH AVE  
DELRAY BEACH, FL 33483 US

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

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:**

Title: PSTD  
Name: ALLEN, ROBERT E  
Address: P.O. BOX 669111  
City-St-Zip: POMPANO BCH, FL 33066

I hereby 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 all other like empowered.

SIGNATURE: REA

PRES

04/11/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date