



2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2005 8:00 am
Secretary of State

02-03-2005 90041 023 ***150.00

DOCUMENT # P04000111894 1. Entity Name FORGE INTELLECT CONSULTING CORP.					
Principal Place of Business 1823 KETTLER DR LUTZ, FL 33559			Mailing Address 1823 KETTLER DR LUTZ, FL 33559		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		


 01302005 Chg-P CR2E034 (10/03)

4. FEI Number 16-1704917		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145		Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ _____ City _____ FL Zip Code _____	

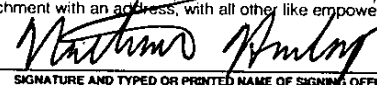
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
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10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	PD	HARLEY, NATHAN	<input type="checkbox"/> Delete				<input type="checkbox"/> Change <input type="checkbox"/> Addition
		1823 KETTLER DR					
		LUTZ, FL 33559					
	VD	HARLEY, MARK	<input type="checkbox"/> Delete				<input type="checkbox"/> Change <input type="checkbox"/> Addition
		1823 KETTLER DR					
		LUTZ, FL 33559					
	S	HARLEY, CHRISTOPHER	<input type="checkbox"/> Delete				<input type="checkbox"/> Change <input type="checkbox"/> Addition
		1823 KETTLER DR					
		LUTZ, FL 33559					
	TD	HARLEY, LOVELLA I	<input type="checkbox"/> Delete				<input type="checkbox"/> Change <input type="checkbox"/> Addition
		1823 KETTLER DR					
		LUTZ, FL 33559					
			<input type="checkbox"/> Delete				<input type="checkbox"/> Change <input type="checkbox"/> Addition
			<input type="checkbox"/> Delete				<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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:  **1-30-05** **305-949-7469**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #