

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000119025

Entity Name: THE MB CONSULTING GROUP, INC.

FILED
Oct 07, 2006
Secretary of State

Current Principal Place of Business:

5708 82 AVE
TAMARAC, FL 33321

New Principal Place of Business:

8106 NW 59TH PLACE
TAMARAC, FL 33321

Current Mailing Address:

5708 82 AVE
TAMARAC, FL 33321

New Mailing Address:

8106 NW 59TH PLACE
TAMARAC, FL 33321

FEI Number: 14-1913661

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIPPE, HELENE
5704 82 AVE
TAMARAC, FL 33321 US

Name and Address of New Registered Agent:

RIPPE, HELENE
8106 NW 59TH PLACE
TAMARAC, FL 33321 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: HELENE RIPPE

10/07/2006

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: P/S () Delete
Name: RIPPE, HELENE A
Address: 22181 BOCA RANCHO DRIVE, SUITE D
City-St-Zip: BOCA RATON, FL 33428

Title: VP/T () Delete
Name: RIPPE, HERB K
Address: 22181 BOCA RANCHO DRIVE, SUITE D
City-St-Zip: BOCA RATON, FL 33428

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/S (X) Change () Addition
Name: RIPPE, HELENE A
Address: 8106 NW 59TH PLACE
City-St-Zip: TAMARAC, FL 33321

Title: VP/T (X) Change () Addition
Name: RIPPE, HERB K
Address: 8106 NW 59TH PLACE
City-St-Zip: TAMARAC, FL 33321

I hereby certify that the information supplied with this filing does not qualify for the 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: HELENE RIPPE

P/S

10/07/2006

Electronic Signature of Signing Officer or Director

Date