## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000157215

Entity Name: FLAMINGO CONSULTING, INC.

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

500 KAIAULU LOOP 500 KAIAULU LOOP

#I MAKAWAO, HI 96768 US MAKAWAO, HI 96768 US

Current Mailing Address: New Mailing Address:

500 KAIAULU LOOP C/O FRAN MCCARTHY 919 ALHAMBRA WAY S

MAKAWAO, HI 96768 US ST PETERSBURG, FL 337054615 US

FEI Number: 71-0974399 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:

REIZES, LESLIE N
1170 GEORGE BUSH BLVD., SUITE 308
DELRAY BCH, FL 33483 US

REIZES, LESLIE N
1170 GEORGE BUSH BLVD
308

DELRAY BEACH, FL 33483 US

DELRAY BEACH, FL 33483 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: 04/30/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

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

Title: D () Delete Title: DP (X) Change () Addition

Name:DELRIVO, GLORIAName:DELRIVO, GLORIAAddress:2450 KEKAULIKE AVEAddress:500 KAIAULU LOOP

City-St-Zip: KULA, HI 967908926 City-St-Zip: MAKAWAO, HI 96768-805 US

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: GLORIA DEL RIVO PD 04/30/2008

Electronic Signature of Signing Officer or Director

Date