

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000022375

FILED
Jan 11, 2008
Secretary of State

Entity Name: RESEARCH CONSULTANTS GROUP, INC.

Current Principal Place of Business:

920 EAST 14 TH STREET
HIALEAH, FL 33010 US

New Principal Place of Business:

765 EAST 9TH STREET
HIALEAH, FL 33010 US

Current Mailing Address:

920 EAST 14 TH STREET
HIALEAH, FL 33010 US

New Mailing Address:

FEI Number: 20-2326912 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INCORPORATE USA, INC.
3150 SANDY RIDGE DR
CLEARWATER, FL 33761 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SOSA, DAMIAN
Address: 920 EAST 14 TH ST
City-St-Zip: HIALEAH, FL 33010 US

Title: V () Delete
Name: SOSA, ISBET
Address: 920 EAST 14 TH ST
City-St-Zip: HIALEAH, FL 33010 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: SOSA, ISBET
Address: 920 EAST 14 TH ST
City-St-Zip: HIALEAH, FL 33010 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: DAMIAN SOSA

PRES

01/11/2008

_____ Electronic Signature of Signing Officer or Director

_____ Date