

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000032661

FILED
Jan 19, 2006
Secretary of State

Entity Name: CONSOLIDATED SYSTEMS, INC.

Current Principal Place of Business:

5037 SABERLINE TER
GREEN ACRES, FL 33463

New Principal Place of Business:

5037 SABERLINE TER
GREEN ACRES, FL 33463 US

Current Mailing Address:

5037 SABERLINE TER
GREEN ACRES, FL 33463

New Mailing Address:

5037 SABERLINE TER
GREEN ACRES, FL 33463 US

FEI Number: 20-0411162

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324 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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Change (X) Addition
Name: VILTE, PAUL L
Address: 5037 SABRELINE TERRACE
City-St-Zip: GREENACRES, FL 33463 US

Title: S () Change (X) Addition
Name: VILTE, LINETTE S
Address: 5037 SABRELINE TERRACE
City-St-Zip: GREENACRES, FL 33463 US

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: LINETTE VILTE

S

01/19/2006

Electronic Signature of Signing Officer or Director

Date