

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000056625

Entity Name: 4 B CONSULTANTS, INC.

FILED
Mar 27, 2007
Secretary of State

Current Principal Place of Business:

1837 16TH AVE NORTH
LAKE WORTH, FL 33460

New Principal Place of Business:

223 SW NO. WAKEFIELD CIRCLE
PORT ST. LUCIE,, FL 34953

Current Mailing Address:

1837 16TH AVE NORTH
LAKE WORTH, FL 33460

New Mailing Address:

223 SW NO. WAKEFIELD CIRCLE
PORT ST. LUCIE, FL 34953

FEI Number: 20-2697811

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWNING, ROBERT
1837 16TH AVE NORTH
LAKE WORTH, FL 33460 US

Name and Address of New Registered Agent:

BROWNING, ROBERT
223 SW NO. WAKEFIELD CIRCLE
PORT ST. LUCIE, FL 34953 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: ROBERT BROWING

03/27/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BROWNING, ROBERT B
Address: 1837 16TH AVE NORTH
City-St-Zip: LAKE WORTH, FL 33460

Title: DST () Delete
Name: BROWNING, BEVERLY
Address: 1837 16TH AVE NORTH
City-St-Zip: LAKE WORTH, FL 33460

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: BROWNING, ROBERT B
Address: 223 SW NO. WAKEFIELD CIRCLE
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: DST (X) Change () Addition
Name: BROWNING, BEVERLY
Address: 223 SW NO. WAKEFIELD CIRCLE
City-St-Zip: PORT ST. LUCIE, FL 34953

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: ROBERT BROWNING

DP

03/27/2007

Electronic Signature of Signing Officer or Director

Date