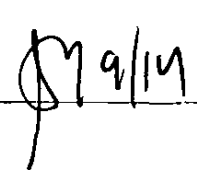


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P05000081940		
1. Entity Name SANDLER CONSULTING, INC		
Principal Place of Business 1118 CHINABERRY DR WESTON, FL 33327		Mailing Address 1118 CHINABERRY DR WESTON, FL 33327
DO NOT WRITE IN THIS SPACE		
		
09122007 No Chg-P CR2E034 (11/05)		
4. FEI Number 51-0545620		Applied For ☒ Not Applicable
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent SANDLER, ALICE 1118 CHINABERRY DR WESTON, FL 33327		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept, the obligations of registered agent.		
SIGNATURE _____ Signature of Registered Agent or Registered Agent's authorized representative (if not the Registered Agent, please print name and title of applicable agent) (NOTE: Registered Agent signature required when reappointing) DATE _____		
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10. OFFICERS AND DIRECTORS		
TITLE	PS	
NAME	SANDLER, ALICE	
STREET ADDRESS	1118 CHINABERRY DR	
CITY- ST- ZIP	WESTON, FL 33327	
TITLE		
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		
NAME	100109723531 09/20/07--01066--022 **\$150.00 DO NOT WRITE IN THIS SPACE	
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <i>X Alice Sandler President Alice Sandler X</i>		9/12/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		DATE