... 2006 FOR PROFIT CORPORATION

FILED Mar 07, 2006 8:00 am Secretary of State 02-17-2006 90061 037 ***150.00

1. Entity Name APPLETON CONSULTING INC.									
Principal Place of Business 1660 NW 19TH AVENUE POMPANO BEACH, FL 33069		Mailing Address 1660 NW 19TH AVENUE POMPANO BEACH, FL 33069		66003898					
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			02142006	Chg-P	CR2E034	(11/05)	
City & State		City & State			4. FEI Numb	*3975	344		plied For Applicable
Zip	Country	Zip	Country		5. Certificate	of Status Desired	□ \$8	8.75 Add	itional
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent Name					
MARZANO, MICHAEL C 1660 NW 19TH AVENUE			}	Street Address (P.O. Box Number is Not Acceptable)					
1	BEACH, FL 33069	Siteet		Olicot riodiess					
	•						FL	Zip Code	_
8. The above	named antity submits this statement to	ed office or registe	ered agent, or bo	th, in the State of Fi	:	niliar with.	and accept		
the obligations of registered agent.									
SIGNATURE									
FILE NOWIN FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution.					i.00 May Be ded to Fees				
10.	OFFICERS AND		11.		ADDITIONS	CHANGES TO OFF			
TITLE .	MARZANO, MICHAEL C	☐ Delete	NAME	1				Change	Addition
STREET ADDRESS CITY-ST-ZIP	1660 NW 19TH AVENUE POMPANO BEACH, FL 33069			-S1-ZIP					
TITLE	VP	☐ Delete	TITLE					Change	Addition
NAME STREET ADDRESS	CASTELLANO, JOSEPH 1660 NW 19TH AVENUE		STREE	ET ADORESS					
CITY-ST-ZIP	POMPANO BEACH, FL 33069	☐ Detece	CITY.	SI-ZP					- Addison
MARIE	<u> </u>	LI Desce	NAME			•	_	Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP				et address -st-zip					٠.
TIFLE		☐ Detate	TITLE	ľ			E	Change	Addition
STREET ADDRESS			NAME STREE	ET ADDRESS					
CITY-ST-ZIP		☐ Delete	CITY. TITLE	ST-ZIP				Change	☐ Addition
NAME		_ Desait	NAME	:			L-	_ Crenge	
STREET ADDRESS CATY-ST-2IP				et address •St-Zip					
TITLE		☐ Delete	TITLE				C	Change	Addition
STREET ADDRESS	1	n		ET ADORESS					
CITY-SI-ZIP		11 6604 000	᠘ـــــ	-SI-ZP	d is Chanter 14	2 Florida Custana	l lusha sashi.		to-mation.
12. I hereby certify that the information supplified with this time does not quality for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is the same legal effect as if made under oath; that I am an officer or officer or director of the corporation or the receiver of this employers to be produce the corporation or the receiver of this employers to be produced by Chapter 607, Florida Statutes; and that may name appears in Block 10 or Block 11 if									
changed	, or on an attachment with an address,	with all differ the endpoliceded.			ר	liclas			
SIGNATURE: US OF STATE OF STAT									



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 21, 2006

APPLETON CONSULTING INC. 1660 NW 19TH AVENUE POMPANO BEACH, FL 33069

Subject: APPLETON CONSULTING INC.

Reference Number: (

P05000162403

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/cj ANNUAL REPORTS SECTION