

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000004731

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: NANCY DUBE CONSULTING SERVICES INC.

## Current Principal Place of Business:

10751 AVENIDA SANTA ANA  
BOCA RATON, FL 33498

## New Principal Place of Business:

13061 SW 30TH COURT  
DAVIE, FL 33330

## Current Mailing Address:

10751 AVENIDA SANTA ANA  
BOCA RATON, FL 33498

## New Mailing Address:

13061 SW 30TH COURT  
DAVIE, FL 33330

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DUBE, NANCY  
10751 AVENIDA SANTA ANA  
BOCA RATON, FL 33498 US

## Name and Address of New Registered Agent:

DUBE, NANCY  
13061 SW 30TH CT  
DAVIE, FL 33330 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: NANCY DUBE

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: DUBE, NANCY  
Address: 10751 AVENIDA SANTA ANA  
City-St-Zip: BOCA RATON, FL 33498

Title: S ( ) Delete  
Name: DUBE, CHRISTIAN  
Address: 10751 AVENIDA SANTA ANA  
City-St-Zip: BOCA RATON, FL 33498

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: DUBE, NANCY  
Address: 13061 SW 30TH CT  
City-St-Zip: DAVIE, FL 33330

Title: S (X) Change ( ) Addition  
Name: DUBE, CHRISTIAN  
Address: 13061 SW 30TH CT  
City-St-Zip: DAVIE, FL 33330

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: NANCY DUBE

PSD

04/30/2009

Electronic Signature of Signing Officer or Director

Date