2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000018620

Entity Name: HANDS-ON CONSULTING, INC.

FT. LAUDERDALE, FL 33306 US

City-St-Zip:

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2716 N.E. 30TH PL APT. 3 FT. LAUDERDALE, FL 33306 US **New Mailing Address: Current Mailing Address:** 2716 N.E. 30TH PL APT. 3 FT. LAUDERDALE, FL 33306 US FEI Number: 20-4272618 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HAND, THOMAS 2716 N.E. 30TH PL APT. 3 FT. LAUDERDALE, FL 33306 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: **PVST** () Delete Title: () Change () Addition HAND, THOMAS Name: Name: 2716 N.E. 30TH PL APT. 3 Address: Address: City-St-Zip: FT. LAUDERDALE, FL 33306 US City-St-Zip: Title: Title: () Change () Addition () Delete Name: HAND, THOMAS Name: 2716 N.E. 30TH PL APT. 3 Address: Address:

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.

City-St-Zip:

SIGNATURE: THOMAS E. HAND CEO 04/30/2009