

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000032211

FILED
Apr 29, 2009
Secretary of State

Entity Name: FOCUS CONSULTING & MARKETING, INC.

Current Principal Place of Business:

2700 W ATLANTIC BLVD
200
POMPANO BEACH, FL 33069

New Principal Place of Business:

Current Mailing Address:

2700 W ATLANTIC BLVD
200
POMPANO BEACH, FL 33069

New Mailing Address:

FEI Number: 20-5021772 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIVIERE, GARRY
198 KENSINGTON WAY
ROYAL PALM BCH, FL 33414 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: RIVIERE, GARRY
Address: 198 KENSINGTON WAY
City-St-Zip: ROYAL PALM BCH, FL 33414

Title: VD (X) Delete
Name: RIVIERE, DIEULENE J
Address: 198 KENSINGTON WAY
City-St-Zip: ROYAL PALM BCH, FL 33414

Title: T (X) Delete
Name: JEANFRANCOIS, JEANINE
Address: 2921 NW 123RD TERR
City-St-Zip: SUNRISE, FL 33323

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: GARRY RIVIERE

PD

04/29/2009

Electronic Signature of Signing Officer or Director

_____ Date