2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000041683

FILED Apr 30, 2008 Secretary of State

Entity Name: THE BROWNSTONE CONSULTING GROUP, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
400 NORTH NEW	YORK AVENUE			
215 WINTER PARK, FL	_ 32789 US			
Current Mailing A	ddress:	New Mailing Address	s:	
400 NORTH NEWY	ORK AVE.			
215 WINTER PARK, FL	32801 US			
FEI Number: 16-17536	65 FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:		Name and Address o	Name and Address of New Registered Agent:	
BROWNSTONE. P.				
400 N. NEW YOŔK 215	· · · · ·			
400 N. NEW YOŔK 215 WINTER PARK, FL The above named e	32801 US entity submits this statement for the	e purpose of changing its registered	d office or registered agent, or both,	
400 N. NEW YORK 215 WINTER PARK, FL The above named e n the State of Floric	32801 US entity submits this statement for the	e purpose of changing its registered	d office or registered agent, or both,	
400 N. NEW YORK 215 WINTER PARK, FL The above named e n the State of Floric SIGNATURE:	32801 US entity submits this statement for the		d office or registered agent, or both, Date	
400 N. NEW YORK 215 WINTER PARK, FL The above named e n the State of Floric SIGNATURE: Ele	. 32801 US entity submits this statement for the da.			
400 N. NEW YORK 215 WINTER PARK, FL The above named e in the State of Floric SIGNATURE: Ele	antity submits this statement for the da. ectronic Signature of Registered A mancing Trust Fund Contribution ().	gent		
400 N. NEW YORK 215 WINTER PARK, FL The above named e in the State of Floric SIGNATURE: Election Campaign Fin OFFICERS AND D Title: P Name: SIRIANN Address: 216 E. C	antity submits this statement for the da. ectronic Signature of Registered A mancing Trust Fund Contribution ().	gent ADDITIONS/CHANGE	Date	

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: ROBERT L. SIRIANNI JR. PRES 04/30/2008