2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000051425

Entity Name: CONSUMER ADVISORY SERVICES INC

FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5420 NW 11 STREET #307 PLANTATION, FL 33313 **New Mailing Address: Current Mailing Address:** PO BOX 920 FORT LAUDERDALE, FL 33302 FEI Number: 20-4691100 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: CONSUMER ADVISORY SERVICES INC CAS INC 5420 NW 11 STREET 5420 NW 11 STREET #307 #307 PLANTATION, FL 33313 US PLANTATION, FL 33313 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: ROBBIE HICKS 04/30/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition HICKS, ROBBIE G Name: Name: 5420 NW 11 STREET #307 Address: Address: City-St-Zip: PLANTATION, FL 33313 City-St-Zip: Title: VΡ (X) Delete Title: () Change () Addition Name: LOMACK, CHASHIA L Name: 4321 NW 19 STREET #5 Address: Address: LAUDERHILL, FL 33313 City-St-Zip: 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: ROBBIE G HICKS D,T 04/30/2007