## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000138217

**Entity Name: PREMIUM CONSULTING CORPORATION** 

FILED Jan 30, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

8600 NW 53 TERRACE 18520 NW 67 AVENUE

SUITE 123 #287

DORAL, FL 33166 MIAMI, FL 33015

**Current Mailing Address: New Mailing Address:** 

8600 NW 53 TERRACE 18520 NW 67 AVENUE

SUITE 123 #287 DORAL, FL 33166 MIAMI, FL 33015

FEI Number: 20-5812499 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:

GONZALEZ, MABEL GONZALEZ, MABEL 8600 NW 53 TERRACE 18520 NW 67 AVENUE SUITE 123 #287

DORAL, FL 33166 US MIAMI, FL 33015 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: MABEL GONZALEZ 01/30/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete Title: (X) Change ( ) Addition

GONZALEZ, MABEL Name: Name: GONZALEZ, MABEL 8600 NW 53 TERRACE, SUITE 123 Address: 18520 NW 67 AVENUE, #287 Address:

City-St-Zip: DORAL, FL 33166 City-St-Zip: MIAMI, FL 33015

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.

Ρ SIGNATURE: MABEL GONZALEZ 01/30/2008