## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000141781

VOSS, JOSEPH A

100 STEVENS LANDING DR. #206

MARCO ISLAND, FL 34145 US

Name:

Address:

City-St-Zip:

Entity Name: JOE VOSS CONSULTING & DESIGN, INC.

FILED Jan 24, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
100 STEVENS LANDING DR. #206			100 STEVENS LANDING DR.		
MARCO IS	SLAND, FL 3	4145 US	#206 MARCO ISLAND, FL	34145 US	
Current Mailing Address:			New Mailing Address:		
	ENS LANDIN SLAND, FL 3				
FEI Number	r: 20-5870161	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
MARCO IS	ŒNS LANDIN SLAND, FL 3	4145 US	purpose of changing its registered	d office or registered agent, or both,	
SIGNATU		onic Signature of Registered Ac	ient	Date	
Election Ca		ng Trust Fund Contribution ( ).	,		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	VOSS, JOSEI 100 STEVENS	) Delete PH A S LANDING DR. #206 ND, FL 34145 US	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	TYMCIO, JUD 100 STEVENS	) Delete ITH G S LANDING DR. #206 ND, FL 34145 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TYMCIO, JUÈ 100 STEVENS	) Delete ITH G S LANDING DR. #206 ND, FL 34145 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	DIR (	) Delete	Title:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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.

Name:

Address:

City-St-Zip:

SIGNATURE: JOSEPH A VOSS PRES 01/24/2007