2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000002986

Name:

Address:

City-St-Zip:

FILED Apr 22, 2008 Secretary of State

Entity Name: BANDI CONSULTING GROUP, INC. **Current Principal Place of Business: New Principal Place of Business:** 11310 N. PINE COURT, UNIT B122 TAMPA, FL 33612 **Current Mailing Address: New Mailing Address:** PO BOX 17766 TAMPA, FL 33682 US FEI Number: 20-8404525 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: BOYKIN, IMANI A ESQ BETHEL, INGRID I JD 11310 N. PINE COURT 550 WATER STREET, SUITE 951 JACKSONVILLE, FL 32202 UNIT B122 TAMPA, FL 33612 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: INGRID I. BETHEL, JD 04/22/2008 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition BETHEL, BARBARA L Name: Name: 11310 N. PINE COURT, UNIT B122 Address: Address: City-St-Zip: TAMPA, FL 33612 US City-St-Zip: Title: VΡ Title: () Delete () Change () Addition Name: BETHEL, INGRID I Name: 7643 GATE PARKWAY, SUITE 104, PMB 24 Address: Address: JACKSONVILLE, FL 32256 US City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition BETHEL, INGRID I Name: Name: 7643 GATE PARKWAY, SUITE 104, PMB 24 Address: Address: City-St-Zip: JACKSONVILLE, FL 32256 US City-St-Zip: Title: () Delete Title: () Change () Addition BETHEL, BARBARA L

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.

Name:

Address:

City-St-Zip:

SIGNATURE: INGRID I. BETHEL, JD VP/S 04/22/2008

11310 N. PINE COURT, UNIT B122

TAMPA, FL 33612 US