

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000048512

FILED  
Feb 23, 2009  
Secretary of State

Entity Name: COMPREHENSIVE FINANCIAL CONSULTANT, INC.

## Current Principal Place of Business:

470 NW 87TH TERRACE  
103  
PLANTATION, FL 33324

## New Principal Place of Business:

160 COMMODORE DRIVE  
SUITE 824  
PLANTATION, FL 33325

## Current Mailing Address:

470 NW 87TH TERRACE  
103  
PLANTATION, FL 33324

## New Mailing Address:

160 COMMODORE DRIVE  
SUITE 824  
PLANTATION, FL 33325

FEI Number: 01-0894004

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STEWART, KEISHA M  
470 NW 87TH TERRACE  
103  
PLANTATION, FL 33324 US

## Name and Address of New Registered Agent:

STEWART, KEISHA M  
160 COMMODORE DRIVE  
SUITE 824  
PLANTATION, FL 33325 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: KEISHA STEWART

02/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: STEWART, KEISHA M  
Address: 470 NW 87TH TERRACE UNIT 103  
City-St-Zip: PLANTATION, FL 33324

Title: VP ( ) Delete  
Name: MONCRIEFFE, BASIL  
Address: 470 NW 87TH TERRACE APT 103  
City-St-Zip: PLANTATION, FL 33324

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: STEWART, KEISHA M  
Address: 160 COMMODORE DRIVE SUITE 824  
City-St-Zip: PLANTATION, FL 33325

Title: VP (X) Change ( ) Addition  
Name: MONCRIEFFE, BASIL J  
Address: 160 COMMODORE DRIVE SUITE 824  
City-St-Zip: PLANTATION, FL 33325

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: KEISHA STEWART

P

02/23/2009

Electronic Signature of Signing Officer or Director

Date