

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000064179

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

**Entity Name:** TOUSSAINT CONSULTING SERVICES, INC.

**Current Principal Place of Business:**

5650 NE 2ND AVE  
SUITE C  
MIAMI, FL 33137

**New Principal Place of Business:**

**Current Mailing Address:**

5650 NE 2ND AVE  
SUITE C  
MIAMI, FL 33137

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TOUSSAINT, ELISSON  
6219 NE 1ST AVENUE  
MIAMI, FL 33138 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: TOUSSAINT, ELISSON  
Address: 6219 NE 1ST AVENUE  
City-St-Zip: MIAMI, FL 33138 US

Title: VICE  
Name: TOUSSAINT, RAYNOLD J  
Address: 6219 NE 1ST AVE  
City-St-Zip: MIAMI, FL 33138 US

I hereby 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 all other like empowered.

SIGNATURE: ELISSON TOUSSAINT

MR

04/27/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date