

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000099585

FILED
Jan 19, 2009
Secretary of State

Entity Name: PARADIGM SHIFT CONSULTING CORP.

Current Principal Place of Business:

600 WEST LAS OLAS BOULEVARD
1102-S
FORT LAUDERDALE, FL 33312

Current Mailing Address:

600 WEST LAS OLAS BOULEVARD
1102-S
FORT LAUDERDALE, FL 33312

New Principal Place of Business:

600 WEST LAS OLAS BOULEVARD
1102
FORT LAUDERDALE, FL 33312

New Mailing Address:

600 WEST LAS OLAS BOULEVARD
1102
FORT LAUDERDALE, FL 33312

FEI Number: 26-0875515

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LESTER, MICHAEL J
600 WEST LAS OLAS BOULEVARD
1102-S
FORT LAUDERDALE, FL 33312 US

Name and Address of New Registered Agent:

LESTER, MICHAEL J
600 WEST LAS OLAS BOULEVARD
1102
FORT LAUDERDALE, FL 33312 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:

01/19/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LESTER, MICHAEL J
Address: 600 WEST LAS OLAS BOULEVARD, #1102-S
City-St-Zip: FORT LAUDERDALE, FL 33312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LESTER, MICHAEL J
Address: 600 WEST LAS OLAS BOULEVARD, #1102
City-St-Zip: FORT LAUDERDALE, FL 33312

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: MICHAEL J. LESTER

P

01/19/2009

Electronic Signature of Signing Officer or Director

Date