

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000093919

FILED
Jan 30, 2009
Secretary of State

Entity Name: FIRST OPTION CONSULTING COMPANY

Current Principal Place of Business:

513 EAST SAMPLE ROAD
DEERFIELD BEACH, FL 33064 US

New Principal Place of Business:

2255 GLADES RD
STE 324A
BOCA RATON, FL 33431 US

Current Mailing Address:

513 EAST SAMPLE ROAD
DEERFIELD BEACH, FL 33064 US

New Mailing Address:

2255 GLADES RD
STE 324A
BOCA RATON, FL 33431 US

FEI Number: 42-1766741

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CABRAL, ELIANA
5101 MEADOW OAKS DR
COCONUT CREEK, FL 33073 US

Name and Address of New Registered Agent:

AMORIN, FRANCOIS
2255 GLADES RD
BOCA RATON, FL 33431 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: FRANCOIS AMORIM

01/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: AMORIM, FRANCOIS P
Address: 513 EAST SAMPLE ROAD
City-St-Zip: DEERFIELD BEACH, FL 33064 US

Title: VPT () Delete
Name: AMORIM, KARINE F
Address: 513 EAST SAMPLE ROAD
City-St-Zip: DEERFIELD BEACH, FL 33064 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: AMORIM, FRANCOIS P
Address: 2255 GLADES ROAD, STE 324A
City-St-Zip: BOCA RATON, FL 33431 US

Title: VPT (X) Change () Addition
Name: AMORIM, KARINE F
Address: 2255 GLADES ROAD, STE 324A
City-St-Zip: BOCA RATON, FL 33431 US

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: FRANCOIS AMORIM

PS

01/30/2009

Electronic Signature of Signing Officer or Director

Date