2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000099757

Address:

City-St-Zip:

Entity Name: ZOLID CONSULTING ASSOCIATES, INC

FILED Apr 08, 2009 Secretary of State

Entity Nar	me: ZULID C	UNSULTING ASSOCIATES, IN	IC.			
Current P	rincipal Place	of Business:	New Principal Place of Business:			
SUITE 212	CAYNE BLVD. ! IAMI BEACH,					
Current Mailing Address:			New Mailing Address:			
SUITE 212	CAYNE BLVD. ! IAMI BEACH,					
FEI Number:	26-3724486	FEI Number Applied For ()	FEI Number Not Appl	icable () Certificate of Status Des	ired()	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:			
ZADEAH, ADRIAN 15923 BICAYNE BLVD. SUITE 212 NORTH MIAMI BEACH, FL 33160 US			ZADEH, ADRIAN A 15923 BICAYNE BLVD. SUITE 212 NORTH MIAMI BEACH, FL 33160 US			
	named entity of Florida.	submits this statement for the p	ourpose of changing i	ts registered office or registered ager	it, or both,	
SIGNATURE: ADRIAN ZADEH				04/08/2009		
	Electror	nic Signature of Registered Age	ent	Date		
Election Car	npaign Financin	g Trust Fund Contribution ().				
OFFICERS	S AND DIREC	TORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	ZADEH, ADRIA 15923 BISCAY) Delete N NE BLVD. SUITE 212 BEACH, FL 33160	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	()) Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition ZADEH, SYLVIA P 15923 BISCAYNE BLVD. SUITE 212 NORTH MIAMI BEACH, FL 33160		
Title: Name: Address: City-St-Zip:	()) Delete	Title: Name: Address: City-St-Zip:	S () Change (X) Addition ZADEH, SYLVIA P 15923 BISCAYNE BLVD. SUITE 212 NORTH MIAMI BEACH, FL 33160		
Title: Name: Address: City-St-Zip:	()) Delete	Title: Name: Address: City-St-Zip:	P () Change (X) Addition ZADEH, ADRIAN A 15923 BISCAYNE BLVD. SUITE 212 NORTH MIAMI BEACH, FL 33160		
Title: Name:	() Delete	Title: Name:	VP () Change (X) Addition ZADEH, SYLVIA P		

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.

Address:

15923 BISCAYNE BLVD. SUITE 212

City-St-Zip: NORTH MIAMI BEACH, FL 33160

SIGNATURE: SYLVIA PERLA ZADEH S 04/08/2009