

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000051260

**Entity Name:** CISTRONS CONSULTING, INC.

**FILED**  
**Feb 20, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

5705 OXFORD MOOR BLVD.  
WINDERMERE, FL 34786

**New Principal Place of Business:**

**Current Mailing Address:**

5705 OXFORD MOOR BLVD.  
WINDERMERE, FL 34786

**New Mailing Address:**

809 OLIVE WAY  
SEATTLE, WA 98101

**FEI Number:** 27-0382778

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

GABRIEL, C.J. JR.  
5705 OXFORD MOOR BLVD.  
WINDERMERE, FL 34786 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: MR.  
Name: GABRIEL, C.J. JR.  
Address: 5705 OXFORD MOOR BLVD.  
City-St-Zip: WINDERMERE, FL 34786

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: C.J. GABRIEL, JR

CEO

02/20/2012

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

\_\_\_\_\_  
Date