

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000018106

**FILED**  
**Apr 30, 2011**  
**Secretary of State**

**Entity Name:** WORKS BY BYRON CONSULTING, INC.

**Current Principal Place of Business:**

3425 NW 95TH STREET  
MIAMI, FL 33147

**New Principal Place of Business:**

**Current Mailing Address:**

3425 NW 95TH STREET  
MIAMI, FL 33147

**New Mailing Address:**

**FEI Number:** 61-1609468

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BEASLEY, ANTHONY  
3425 NW 95TH STREET  
MIAMI, FL 33147 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:** CEO  
**Name:** BEASLEY, ANTHONY  
**Address:** 380 NE 54TH STREET, APT # 4  
**City-St-Zip:** MIAMI, FL 33137

**Title:** CFO  
**Name:** JONES, ARLINDA  
**Address:** 3425 NW 95TH STREET  
**City-St-Zip:** MIAMI, FL 33147

**Title:** DIR  
**Name:** BEASLEY, DEBRA  
**Address:** 670 MARTIN ROAD  
**City-St-Zip:** TWIN CITY, GA 30471

**Title:** DIR  
**Name:** BEASLEY, TANDREA  
**Address:** 670 MARTIN ROAD  
**City-St-Zip:** TWIN CITY, GA 30471

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:** ANTHONY BEASLEY

CEO

04/30/2011

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

\_\_\_\_\_  
Date