

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000036376

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** EXCENTRIC DEVELOPMENT GROUP INC

**Current Principal Place of Business:**

1428 SE 4TH AVE  
STE 115  
DEERFIELD BEACH, FL 33441

**New Principal Place of Business:**

**Current Mailing Address:**

1 NE 23 AVE  
STE 4  
POMPANO BEACH, FL 33062

**New Mailing Address:**

1937 EAST ATLANTIC BLVD  
STE 103  
POMPANO BEACH, FL 33060

**FEI Number:** 27-3499626

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CONSULTING SOLUTIONS INC  
1 NE 23 AVE  
STE 4  
POMPANO BEACH, FL 33062 US

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

CONSULTING SOLUTIONS INC  
1937 EAST ATLANTIC BLVD  
STE 103  
POMPANO BEACH, FL 33060 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: MARK LUCIANI

04/29/2011

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: JONES, MICHAEL  
Address: 102 BROOKHOLLOW DR  
City-St-Zip: FLAT ROCK, NC 28731

Title: VP  
Name: MASCI, MICHELLE  
Address: 102 BROOKHOLLOW DR  
City-St-Zip: FLAT ROCK, NC 28731

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: MICHAEL JONES

P

04/29/2011

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

\_\_\_\_\_  
Date