

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000051931

FILED
Apr 26, 2012
Secretary of State

Entity Name: THE JAMES CONSULTING GROUP, INC.

Current Principal Place of Business:

601 SW 142 AVE SUITE 204
PEMBROKE PINES, FL 33027

New Principal Place of Business:

601 SW 142 AVE
SUITE 204
PEMBROKE PINES, FL 33027 UN

Current Mailing Address:

601 SW 142 AVE SUITE 204
PEMBROKE PINES, FL 33027

New Mailing Address:

601 SW 142 AVE
SUITE 204
PEMBROKE PINES, FL 33027

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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: D
Name: JAMES, GARY
Address: 601 SW 142 AVE SUITE 204
City-St-Zip: PEMBROKE PINES, FL 33027

Title: P
Name: JAMES, BEULAH L
Address: 601 SW 142 AVE SUITE 204
City-St-Zip: PEMBROKE PINES, FL 33027

Title: V
Name: JAMES, STEPHON
Address: 212-02 MURDOCK AVE
City-St-Zip: QUEENS VILLAGE, NY 11429

Title: S
Name: JAMES-PHILLIPS, CECILIA
Address: 8418 ASHFORD BLVD
City-St-Zip: LAUREL, MD 20707

Title: T
Name: JAMES-PHILLIPS, ZACHARY
Address: 8418 ASHFORD BLVD
City-St-Zip: LAUREL, MD 20707

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: GARY JAMES

D

04/26/2012

Electronic Signature of Signing Officer or Director

_____ Date