## 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P93000003438

FILED Jul 22, 2009 Secretary of State

Entity Name: EFFICIE	NT BUSINESS CONSULTING,	, INC.		
Current Principal Place of Business:		New Principal Place of Business:		
15701 NE 15 PL NORTH MIAMI BEACH, FL 33162		951 NE 167 ST #103 NORTH MIAMI BEACH, FL 33162		
Current Mailing Address:		New Mailing Address:		
8362 PINES BLVD #208 PEMBROKE PINES, FL				
FEI Number: 65-0386018	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and Address of	Current Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
JEAN-LOUIS, HARRY 1181 NE 201 TERR MIAMI, FL 33179 US				
The above named entity in the State of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATURE:				
Electro	nic Signature of Registered Ag	ent	Date	

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: Title: (X) Change ( ) Addition ( ) Delete JEAN-LOUIS, HARRY JEAN-LOUIS, HARRY Name: Name: 1181 NE 201 TERR 15701 NE 15TH PLACE Address: Address: City-St-Zip: MIAMI, FL 33162 City-St-Zip: MIAMI, FL 33179 Title: () Delete Title: (X) Change ( ) Addition SAINT CLAIR, ROSE ETHEL MAURICE, GIRAULT Name: Name: Address: 8362 PINES BLVD #208 Address: 8362 PINES BLVD #208 PEMBROKE PINES, FL 33024 PEMBROKE PINES, FL 33024 City-St-Zip: City-St-Zip: Title: Title: (X) Change ( ) Addition () Delete Name: ELIAN, KERLINE M Name: SOUVENIR, GIRAULT 8362 PINES BLVD #208 Address: 8362 PINES BLVD #208 Address: City-St-Zip: PEMBROKE PINES, FL 33024 City-St-Zip: PEMBROKE PINES, FL 33024 Title: ( ) Delete Title: ( ) Change (X) Addition LUNEDAR, GIRAULT Name: Name: 8362 PINES BLVD #208 Address: Address: PEMBROKE PINES, FL 33024 City-St-Zip: City-St-Zip:

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.

SIGNATURE: HARRY JEAN LOUIS Ρ 07/22/2009