

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000023367

Entity Name: CASAS CONSULTING, INC.

FILED  
Jan 06, 2005  
Secretary of State

## Current Principal Place of Business:

11233 NW 62 TER  
MIAMI, FL 33178 US

## New Principal Place of Business:

11233 NW 62 TERRACE  
DORAL, FL 33178 US

## Current Mailing Address:

11233 N.W. 62 TERRACE  
MIAMI, FL 33178 US

## New Mailing Address:

11233 N.W. 62 TERRACE  
DORAL, FL 33178 US

FEI Number: 65-0399382

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CASAS, MARIA T  
11233 N.W. 62 TERR.  
MIAMI, FL 33178 US

## Name and Address of New Registered Agent:

CASAS, MARIA T  
11233 N.W. 62 TERRACE  
DORAL, FL 33178 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:

01/06/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: CASAS, MARIA T  
Address: 11233 N.W. 62 TERR.  
City-St-Zip: MIAMI, FL 33178

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: CASAS, MARIA T  
Address: 11233 N.W. 62 TERRACE  
City-St-Zip: DORAL, FL 33178

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARIA TERESA CASAS

MS.

01/06/2005

Electronic Signature of Signing Officer or Director

Date