2007 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 08, 2007 08:00 AM **DOCUMENT # P94000051405 Secretary of State** 1. Entity Name MAYDAY CONSULTING, INC. Principal Place of Business Mailing Address 2567 SE 7 CT 2567 SE 7 CT HOMESTEAD, FL 33033 HOMESTEAD, FL 33033 01032007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0504625 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent MCGOVERN, JACK DO NOT WRITE 2567 SE 7 CT HOMESTEAD, FL 33033 IN THIS SPACE 9. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or presed name of registered against end title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS MALE MCGOVERN, JACK STREET ADDRESS 2564 SE 7 CT CITY-ST-ZP HOMESTEAD, FL 33033 U00000578169 01/09/07-80018-015 150.00 NULE STREET ADDRESS CITY-ST-7P TIBLE STREET ADDRESS DO NOT WRITE CITY-ST-ZP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZP TITLE MALE STREET ADDRESS CITY-ST-ZP

12. I hereby certify that the information supplied with this filling-does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

TITLE NAME STREET ADDRESS

MATURE AND TYPED OR PRINTED MAKE OF SIGNING OFFICER OR DIRECTO

1-4-67

305 230 9884

Daytime Phone #

FILED