

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000081776

FILED
Jan 05, 2009
Secretary of State

Entity Name: BIOGRAPHIC CONSULTING CORP.

Current Principal Place of Business:

1822 BREAKERS WEST CT
WEST PALM BEACH, FL 33411 US

New Principal Place of Business:

Current Mailing Address:

1822 BREAKERS WEST CT
WEST PALM BEACH, FL 33411 US

New Mailing Address:

FEI Number: 65-0540027

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVINE, RICHARD A
1822 BREAKERS WEST CT
WEST PALM BEACH, FL 33411 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LEVINE, RICHARD A
Address: 1822 BREAKERS WEST CT
City-St-Zip: WEST PALM BEACH, FL 33411

Title: D () Delete
Name: LEVINE, FRANCES R
Address: 4772 NORTH CITATION DR SUITE 106
City-St-Zip: DELRAY BEACH, FL 33445

Title: D () Delete
Name: LEVINE, KIM S
Address: 4784 FOX HUNT TRAIL
City-St-Zip: BOCA RATON, FL 33487

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: RICHARD A. LEVINE

PRES

01/05/2009

Electronic Signature of Signing Officer or Director

Date