

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000063493

Entity Name: HURRICANE CONSULTING, INC.

FILED
Apr 08, 2009
Secretary of State

Current Principal Place of Business:

700 S MAIN ST SUITE 204
LAPEER, MI 48446 US

New Principal Place of Business:

4035 RIDGE TOP RD
325
FAIRFAX, VA 22030 US

Current Mailing Address:

PO BOX 428
LAPEER, MI 48446 US

New Mailing Address:

4035 RIDGE TOP RD
325
FAIRFAX, VA 22030 US

FEI Number: 65-0601088

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE, SUITE 4
WESTON, FL 33331 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: P/D () Delete
Name: YGBUHAY, ARMANDO
Address: 4679 AUTUMN GLORY WAY
City-St-Zip: CHANTILLY, VA 20151 US

Title: VTD () Delete
Name: ROTH, CURTIS
Address: 2133 VILLAGE WEST DR. SOUTH
City-St-Zip: LAPEER, MI 48446 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: CURTIS ROTH

CFO

04/08/2009

Electronic Signature of Signing Officer or Director

Date