2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2005
Secretary of State

DOCUMENT# P95000079386

Entity Name: PHOENIX FINANCIAL CONSULTANT SERVICES, INC.

Current Principal Place of Business:

429 SEABREEZE BLVD., SUITE 213
FT. LAUDERDALE, FL 33316

New Principal Place of Business:

Current Mailing Address:

429 SEABREEZE BLVD., SUITE 213
FT. LAUDERDALE, FL 33316

New Mailing Address:

FEI Number: 65-0532526 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SAEZ, JOVANNI
429 SEABREEZE BLVD #213
FORT LAUDERDALE, FL 33316 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: PD ( ) Delete
Name: SAEZ, JOVANNI
Address: 429 SEABREEZE BLVD #213
City-St-Zip: FT. LAUDERDALE, FL 33316

Title: VD ( ) Delete
Name: CORDERO, FRANK
Address: 1689 HIATUS ROAD, SUITE 192
City-St-Zip: PEMBROKE PINES, FL 33026

Title: ST ( ) Delete
Name: LINCOLN, PATRICIA
Address: 1689 HIATUS RD, STE. 192
City-St-Zip: PEMBROKE PINES, FL 33026

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 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: JOVANNI SAEZ PD 04/12/2005

Electronic Signature of Signing Officer or Director — Date