## **2007 FOR PROFIT CORPORAT ANNUAL REPORT**

## **DOCUMENT # P97000019903**

6. Name and Address of Current Registered Agent

1836 CONSULTING CORP.



**FILED** Feb 15, 2007 08:00 A Secretary of State

Applied For

5617508232

Not Applicable

Principal Place of Business

%NEIL A TELL 7148 MARIANA COURT BOCA RATON, FL 33433

**SIGNATURE:** 

Mailing Address

%NEIL A TELL 7148 MARIANA COURT BOCA RATON, FL 33433



DO NOT WRITE IN THIS SPACE.

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02032007 No Chg-P CR2E034 (11/05)

65-0734290 \$8.75 Additional 5. Certificate of Status Desired Fee Required

4. FEI Number

TELL, NEIL A 7567 IMPERIAL DR	DO NOT WRITE
BOCA RATON, FL 33433	IN THIS SPACE

	named entity submits this statement for the priors of registered agent.	urpose of changing its registered office	or registered agent, or bot	th, in the State of Florida. I am familiar with, and acce	∌pt
SIGNATURE_	Signature, typed or printed name of registered agent and title if	applicable (NOTE: Registered Agent sign	nature required when reinstaking)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		Election Campaign Financing     Trust Fund Contribution.	\$5.00 May Be	U00000636763	1
10.	OFFICERS AND DIREC	TORS		neveoval phone per tanimo	A **
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TELL, NEIL A 7148 MARIANA COURT BOCA RATON, FL 33433				
TITLE NAME STREET ADDRESS CHY-ST-ZIP				·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN T	THIS SPACE	
THILE NAME STREET ADDRESS CITY-ST-ZIP					<u> </u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
indicated of the cor	on this report or supplemental report is true a	ind accurate and that my signature shall I to execute this report as required by C	I have the same least effec	<ol> <li>Florida Statutes. I further certify that the information of as if made under oath; that I am an officer or direct as, and that my name appears in Block 10 or Block 1.</li> </ol>	or .