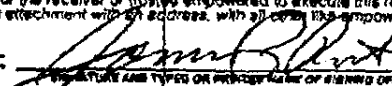


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2006 08:00 AM
Secretary of State

DOCUMENT # P97000097976		
1. Entity Name POITRAS CONSULTING, INC.		
Principal Place of Business 21 GULFSHORE BLVD. N. NAPLES, FL 34102		Mailing Address 21 GULFSHORE BLVD. N. NAPLES, FL 34102
DO NOT WRITE IN THIS SPACE		
3. Name and Address of Current Registered Agent POITRAS, JAMES P 21 GULFSHORE BLVD. N. NAPLES, FL 34102		4. Certificate of Status Desired ☐ \$5.75 Additional Fee Required 4. FBI Number 69-3500064 Applied For ☐ Not Applicable 03222008 No Chg-P CR2E034 (11/05)
DO NOT WRITE IN THIS SPACE		
8. 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 _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature is required when reappointing.		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P POITRAS, JAMES 21 GULFSHORE BLVD. N. NAPLES, FL 34102	
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DO NOT WRITE IN THIS SPACE		
12. I hereby certify that the information supplied with this filing 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 the empowered. SIGNATURE:  Mar 31, 2006 239 435 3486 Signature and typed or printed name of signing officer or director. Date. Office Phone #		

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