

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000102881

Entity Name: A.R. CONSULTING GROUP, INC.

FILED
Jan 14, 2004
Secretary of State

Current Principal Place of Business:

17167 CASSAVA WAY
BOCA RATON, FL 33487

New Principal Place of Business:

Current Mailing Address:

17167 CASSAVA WAY
BOCA RATON, FL 33487

New Mailing Address:

FEI Number: 65-0802557

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REGENSBURG, ANTHONY
17167 CASSAVA WAY
BOCA RATON, FL 33487 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: DP () Delete
Name: REGENSBURG, ANTHONY
Address: 17167 CASSAVA WAY
City-St-Zip: BOCA RATON, FL 33487

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: REGENSBURG, ANTHONY S
Address: 17167 CASSAVA WAY
City-St-Zip: BOCA RATON, FL 33487

Title: PRES () Change (X) Addition
Name: REGENSBURG, ANTHONY S
Address: 17167 CASSAVA WAY
City-St-Zip: BOCA RATON, FL 33487

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: ANTHONY S. REGENSBURG

PRES

01/14/2004

Electronic Signature of Signing Officer or Director

Date