

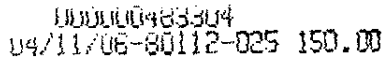


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 28, 2006 08:00 AM
Secretary of State

DOCUMENT # P98000024012			
1. Entity Name HJB CONSULTING GROUP, INC.			
Principal Place of Business 10200 OLD CUTLER ROAD MIAMI, FL 33156	Mailing Address 10200 OLD CUTLER ROAD MIAMI, FL 33156		
DO NOT WRITE IN THIS SPACE			
		03212006 No Chg-P CR2E034 (11/05)	
		4. FEI Number 65-0818911	Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent BETANCOURT, HECTOR 10200 OLD CUTLER ROAD MIAMI, FL 33156		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering)</small> DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BETANCOURT, HECTOR 10200 OLD CUTLER ROAD MIAMI, FL 33156	 04/11/06-80112-025 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BETANCOURT, MONICA 10200 OLD CUTLER ROAD MIAMI, FL 33156		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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 changed, or on an attachment with an address, with all other like empowered.		DO NOT WRITE IN THIS SPACE	
SIGNATURE: <u>Hector J. Betancourt</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		3/24/06 (305) 667-6059 <small>Date Daytime Phone #</small>	