

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000045263

FILED
Jan 07, 2009
Secretary of State

Entity Name: SPECIAL SERVICES INTERNATIONAL CONSULTING GROUP, INC.

Current Principal Place of Business:

10450 W MCNAB RD
FORT LAUDERDALE, FL 33321

New Principal Place of Business:

10450 W MCNAB RD
TAMARAC, FL 33321

Current Mailing Address:

P.O. BOX 16988
PLANTATION, FL 33318

New Mailing Address:

FEI Number: 65-0939838 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ALLEN, GEORGE
7795 SW 6 STREET
PLANTATION, FL 33324 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: D () Delete
Name: DONNELLY, KEVIN
Address: 7795 SW. 6TH ST.
City-St-Zip: FORT LAUDERDALE, FL 33324

Title: P () Delete
Name: COLWELL, EDWARD
Address: 7795 SW 6 STREET
City-St-Zip: PLANTATION, FL 33324

Title: D () Delete
Name: O'REILLY, PATRICK
Address: 7795 SW 6 STREET
City-St-Zip: PLANTATION, FL 33324

Title: VP () Delete
Name: ALLEN, GEORGE
Address: 7795 SW 6 STREET
City-St-Zip: PLANTATION, FL 33324

Title: D () Delete
Name: TYSON, KEVIN
Address: 7795 SW 6 STREET
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: DONNELLY, KEVIN
Address: 7795 SW. 6TH ST.
City-St-Zip: PLANTATION, FL 33324

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 exemption stated 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 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: KEVIN DONNELLY

D

01/07/2009

Electronic Signature of Signing Officer or Director

_____ Date