

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 02, 2006 8:00 am
Secretary of State

08-02-2006 90004 009 ***150.00

DOCUMENT # P99000057482

1. Entity Name
WARREN MANAGEMENT CONSULTING, INC



Principal Place of Business

18531 SW 92 PL
MIAMI, FL 33157

Mailing Address

18531 SW 92 PL
MIAMI, FL 33157

50023911



07252006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0937881

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

WARREN, GEORGE A
18531 SW 92 PL
MIAMI, FL 33157

**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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P WARREN, GEORGE A 8041 SW 89TH TERRACE MIAMI, FL 33156
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST DUBE, MARILYN 18531 SW 92 PL MIAMI, FL 33157
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	

**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 like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR


Date

Daytime Phone #

George A. Warren 7/26/06 305-282-5118

2006 FOR PROFIT CORPORATION ANNUAL REPORT

ATTACHMENT

DOCUMENT # P99000057482 1. Entity Name WARREN MANAGEMENT CONSULTING, INC					
Principal Place of Business 18531 SW 92 PL MIAMI, FL 33157			Mailing Address 18531 SW 92 PL MIAMI, FL 33157		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
07192006		Chg-P		CR2E034 (11/05)	
4. FEI Number 65-0937881				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
WARREN, GEORGE A 18531 SW 92 PL MIAMI, FL 33157			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="text-align: right;"> FL Zip Code </div>		
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 reinstating) DATE</small>					
FILE NOW!!! FEE IS \$550.00 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WARREN, GEORGE A 8041 SW 89TH TERRACE MIAMI, FL 33156 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST DUBE, MARILYN 18531 SW 92 PL MIAMI, FL 33157 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

50023911

[REDACTED]

ATTACHMENT...

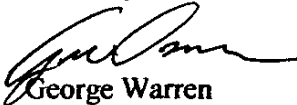
July 26, 2006

50023911
199000057482

To Whom It May Concern:

Warren Management Consulting, Inc. did NOT receive the annual report notice.
Therefore, WMCI is requesting the \$400.00 late fee be waived.
Enclosed is a check for \$150.00. Thank you.

Sincerely,



George Warren
Warren Management Consulting, Inc.