

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S48930

FILED
Mar 11, 2008
Secretary of State

Entity Name: AREEA ASSESSMENT CONSULTANTS, INC.

Current Principal Place of Business:

2000 W. COMMERCIAL BLVD.
SUITE #218
FORT LAUDERDALE, FL 33309

Current Mailing Address:

2000 W. COMMERCIAL BLVD.
SUITE #218
FORT LAUDERDALE, FL 33309

New Principal Place of Business:

1640 W. OAKLAND PARK BLVD.
SUITE #402
FORT LAUDERDALE, FL 33311

New Mailing Address:

1640 W. OAKLAND PARK BLVD.
SUITE #402
FORT LAUDERDALE, FL 33311

FEI Number: 65-0266905

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STONE, MARYJANE
2000 COMMERCIAL BLVD.
SUITE #218
FORT LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

STONE, MARYJANE
1640 W. OAKLAND PARK BLVD.
SUITE #402
FORT LAUDERDALE, FL 33311 US

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:

03/11/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: STONE, MARYJANE,
Address: 2000 W. COMMERCIAL BLVD., SUITE 218
City-St-Zip: MIAMI, FL 33156

Title: VP () Delete
Name: CANNON, MICHAEL Y
Address: 9400 SO DADELAND BLVD, PH1
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: STONE, MARYJANE,
Address: 1640 W. OAKLAND PARK BLVD. SUTIE 402
City-St-Zip: MIAMI, FL 33311

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: MARYJANE STONE

PRES

03/11/2008

Electronic Signature of Signing Officer or Director

Date