

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000008172

Entity Name: STEVEN HALPERN CONSULTING, INC.

Current Principal Place of Business:

4 WHISPERING PINES TRAIL
ORMOND BEACH, FL 32174

Current Mailing Address:

4 WHISPERING PINES TRAIL
ORMOND BEACH, FL 32174

FEI Number: 46-4768759

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HALPERN, STEVEN
4 WHISPERING PINES TRAIL
ORMOND BEACH, FL 32174 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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title D
Name HALPERN, STEVEN
Address 4 WHISPERING PINES TRAIL
City-State-Zip: ORMOND BEACH FL 32174

I hereby 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 all other like empowered.

SIGNATURE: STEVEN J. HALPERN

PRESIDENT

02/16/2015

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date