

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F02000003561

FILED  
Jan 21, 2003  
Secretary of State

Entity Name: FERRARO CONSULTING, INC.

**Current Principal Place of Business:**

5110 SOMERVILLE DR.  
VIERA, FL 32955

**New Principal Place of Business:**

**Current Mailing Address:**

5110 SOMERVILLE DR.  
VIERA, FL 32955

**New Mailing Address:**

FEI Number: 83-0330376

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

NICOLETTA FERRARO TIEKEN  
5110 SOMERVILLE DR.  
VIERA, FL 32955

**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: CPST ( ) Delete  
Name: NICOLETTA FERRARO TI, EKEN  
Address: 5110 SOMERVILLE DR.  
City-St-Zip: VIERA, FL 32955

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: NICOLETTA FERRARO TIEKEN

PRES

01/21/2003

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date