

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000081103

FILED  
Apr 25, 2005  
Secretary of State

Entity Name: M2 BUSINESS CONSULTING, INC.

**Current Principal Place of Business:**

146 THORNTON DR  
PALM BEACH GARDENS, FL 33418

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 33627  
PALM BEACH GARDENS, FL 33420

**New Mailing Address:**

FEI Number: 05-0602992      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

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

MATHIS, PAMELA C  
P.O. BOX 33627  
PALM BEACH GARDENS, FL 33420 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: PAMELA MATHIS      04/25/2005  
Electronic Signature of Registered Agent      Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: MERCHANT, SHARON J  
Address: 146 THORNTON DR  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: VD ( ) Delete  
Name: MATHIS, DONALD B  
Address: 146 THORNTON DR  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: ST ( ) Delete  
Name: MATHIS, PAMELA C  
Address: 146 THORNTON DR  
City-St-Zip: PALM BEACH GARDENS, FL 33418

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

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 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: PAM MATHIS      ST      04/25/2005  
Electronic Signature of Signing Officer or Director      Date