

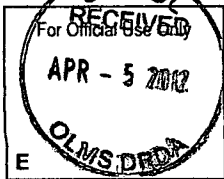
4/5/12

FORM LM-21

RECEIPTS AND DISBURSEMENTS REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.

Required of persons including Labor Relations Consultants and Other Individuals and Organizations, Under section 203(b) of the Labor-Management Relations and Disclosure Act of 1959, as amended. (LMRDA)



492382

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1. File Number C- 675	2. Period Covered By This Report From: 01/01/2011 Through: 12/31/2011
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A. Person Filing	
3. Name and mailing address (include ZIP Code): Name: Ana Rodriguez Title: President/CEO Organization: Prestige Consulting Solutions LLC. P.O. Box, Building and Room Number, if any: Street: 509 South Chickasaw Trail City: Orlando State: Florida ZIP Code + 4: 32825	4. Any other address where records necessary to verify this report are kept: Name: Ana Rodriguez Title: President/CEO Organization: Prestige Consulting Solutions LLC. P.O. Box, Building and Room Number, if any: Street: 5500 Florence Harbor Dr. City: Orlando State: Florida ZIP Code + 4: 32829

Signatures

Each of the undersigned declares, under penalty of perjury and other applicable penalties of law, that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the Section on penalties in the instructions).

17. Signed: [Signature] Title: President On: 02/28/2012 Date: 02/28/2012 Telephone Number: 407-207-2254	18. Signed: N/A Title: Treasurer On: 02/28/2012 Date: 02/28/2012 Telephone Number: N/A
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Name of Person Filing: Ana Rodriguez	File Number C- 675
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B. Statement of Receipts Report all receipts from employers in connection with labor relations advice or services regardless of the purposes of the advice or services.

5.a. Name and Address of Employer (including trade name, if any).		Mailing Address: P.O. Box, Building and Room Number, if any	
Employer	The Chef's Warehouse		
Trade Name		Street	100 East Ridge Road
Attention To	Patricia Lecouras	City	Ridgefield
Title	Vice President of Human Resources	State	Connecticut ZIP Code + 4 06877
5.b. Termination Date 02/12/2011		5.c. Amount 85,725	
6. TOTAL RECEIPTS FROM ALL EMPLOYERS 85,725			

C. Statement of Disbursements Report all disbursements made by the reporting organization in connection with labor relations advice or services rendered to the employers listed in Part B.

7. Disbursements to Officers and Employees:						
(a) Name	(b) Salary	(c) Expenses	(d) Totals			
Jason Rodriguez	36,675	0	36,675	9. Office and Administrative Expenses		
Mike Roan	49,050	0	49,050	10. Publicity		
				11. Fees for Professional Services		
				12. Loans Made		
				13. Other Disbursements		
8. Total disbursements to officers and employees:			85,725	14. Total Disbursements (Sum of Items 8-13)	85,725	

D. Schedule of Disbursements for Reportable Activity Use this Schedule to report only disbursements made for the purposes described in Part D of the instructions.

15.a. Employer Name: Prestige Consulting Solutions LLC,		15.b. Trade Name, if any: Consulting Services	
15.c. To Whom Paid Name Jason/Mike Rodriguez/Roan Title Senior Consultant/Consultant Organization Prestige Consulting Solutions LLC, P.O. Box, Building and Room Number, if any Street 509 South Chickasaw Trail #249 City Orlando State Florida ZIP Code + 4 32825		15.d. Amount 85,725 15.e. Purpose To Persuade employees to exercise or not exercise, or persuade employees as to the manner of exercising the right to organize and bargain collectively through representatives of their own choosing.	
16. TOTAL DISBURSEMENTS FOR ALL REPORTABLE ACTIVITY 85,725			

Name of Person Filing: Ana Rodriguez	File Number C- 675
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B. Statement of Receipts Report all receipts from employers in connection with labor relations advice or services regardless of the purposes of the advice or services.

5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Preferred Freezer Services Oper LLC		P.O. Box, Building and Room Number, if any	
Trade Name		Street 4901 Bandini Blvd	
Attention To Sam Hensley		City Vernon	
Title Vice President of Human Resources		State California ZIP Code + 4 90058	

5.b. Termination Date 04/02/2011	5.c. Amount 61,250
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6. TOTAL RECEIPTS FROM ALL EMPLOYERS 61,250

C. Statement of Disbursements Report all disbursements made by the reporting organization in connection with labor relations advice or services rendered to the employers listed in Part B.

7. Disbursements to Officers and Employees:						
(a) Name	(b) Salary	(c) Expenses	(d) Totals			
Jason Rodriguez	33,750	0	33,750	9. Office and Administrative Expenses		
Jack Burmudez	27,500	0	27,500	10. Publicity		
	0	0	0	11. Fees for Professional Services		
				12. Loans Made		
				13. Other Disbursements		
8. Total disbursements to officers and employees:			61,250	14. Total Disbursements (Sum of Items 8-13)	61,250	

D. Schedule of Disbursements for Reportable Activity Use this Schedule to report only disbursements made for the purposes described in Part D of the instructions.

15.a. Employer Name: Prestige Consulting Solutions LLC,	15.b. Trade Name, If any: Consulting Services
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15.c. To Whom Paid Name Jason/Jack Rodriguez/Bermud Title Senior Consultant/Consultant Organization Prestige Consulting Solutions LLC, P.O. Box, Building and Room Number, if any Street 509 South Chickasaw Trail #249 City Orlando State Florida ZIP Code + 4 32825	15.d. Amount 61,250 15.e. Purpose To Persuade employees to exercise or not exercise, or persuade employees as to the manner of exercising the right to organize and bargain collectively through representatives of their own choosing.
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16. TOTAL DISBURSEMENTS FOR ALL REPORTABLE ACTIVITY 61,250
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Name of Person Filing: Ana Rodriguez	File Number C- 675
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B. Statement of Receipts Report all receipts from employers in connection with labor relations advice or services regardless of the purposes of the advice or services.

5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer	Balfour Beatty Communities	P.O. Box, Building and Room Number, if any	
Trade Name		Street	10 Campus Blvd
Attention To	Rosemary Phillips	City	Newton Square
Title	Vice President of Human Resources	State	Pennsylvania ZIP Code + 4 19073

5.b. Termination Date 08/06/2011	5.c. Amount 47,885
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6. TOTAL RECEIPTS FROM ALL EMPLOYERS 47,885

C. Statement of Disbursements Report all disbursements made by the reporting organization in connection with labor relations advice or services rendered to the employers listed in Part B.

7. Disbursements to Officers and Employees:						
(a) Name	(b) Salary	(c) Expenses	(d) Totals			
Jason Rodriguez	47,885	0	47,885	9. Office and Administrative Expenses		
	0	0	0	10. Publicity		
	0	0	0	11. Fees for Professional Services		
				12. Loans Made		
				13. Other Disbursements		
8. Total disbursements to officers and employees:			47,885	14. Total Disbursements (Sum of Items 8-13)	47,885	

D. Schedule of Disbursements for Reportable Activity Use this Schedule to report only disbursements made for the purposes described in Part D of the instructions.

15.a. Employer Name: Prestige Consulting Solutions LLC,	15.b. Trade Name, If any: Consulting Services
15.c. To Whom Paid	15.d. Amount 47,885
Name Jason Rodriguez	15.e. Purpose To Persuade employees to exercise or not exercise, or persuade employees as to the manner of exercising the right to organize and bargain collectively through representatives of their own choosing.
Title Senior Consultant	
Organization Prestige Consulting Solutions LLC,	
P.O. Box, Building and Room Number, if any	
Street 509 South Chickasaw Trail #249	
City Orlando	
State Florida ZIP Code + 4 32825	
16. TOTAL DISBURSEMENTS FOR ALL REPORTABLE ACTIVITY 47,885	

Name of Person Filing: Ana Rodriguez	File Number C- 675
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B. Statement of Receipts Report all receipts from employers in connection with labor relations advice or services regardless of the purposes of the advice or services.

5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer	Krasdale Foods	P.O. Box, Building and Room Number, if any	
Trade Name		Street	65 West Red Oak Lane
Attention To	Howard Jacobs	City	White Plains
Title	Vice President of Human Resources	State	New York ZIP Code + 4 10604
5.b. Termination Date 10/28/2011		5.c. Amount 22,347	
6. TOTAL RECEIPTS FROM ALL EMPLOYERS 22,347			

C. Statement of Disbursements Report all disbursements made by the reporting organization in connection with labor relations advice or services rendered to the employers listed in Part B.

7. Disbursements to Officers and Employees:				
(a) Name	(b) Salary	(c) Expenses	(d) Totals	
Jason Rodriguez	22,347	0	22,347	9. Office and Administrative Expenses
	0	0	0	10. Publicity
	0	0	0	11. Fees for Professional Services
				12. Loans Made
				13. Other Disbursements
8. Total disbursements to officers and employees:			22,347	14. Total Disbursements (Sum of Items 8-13) 22,347

D. Schedule of Disbursements for Reportable Activity Use this Schedule to report only disbursements made for the purposes described in Part D of the instructions.

15.a. Employer Name: Prestige Consulting Solutions LLC,		15.b. Trade Name, if any: Consulting Services	
15.c. To Whom Paid		15.d. Amount 22,347	
Name	Jason Rodriguez	15.e. Purpose To Persuade employees to exercise or not exercise, or persuade employees as to the manner of exercising the right to organize and bargain collectively through representatives of their own choosing.	
Title	Senior Consultant		
Organization	Prestige Consulting Solutions LLC,		
P.O. Box, Building and Room Number, if any			
Street	509 South Chickasaw Trail #249		
City	Orlando		
State	Florida ZIP Code + 4 32825		
16. TOTAL DISBURSEMENTS FOR ALL REPORTABLE ACTIVITY 22,347			