FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 **DOCUMENT #**

/Q\

FILED Feb 27 1998 8:00am Secretary of State

1, Corporation	N CONSULTANT COMPU		CES, CORP.			# (CONTINUES THE CONTINUES TO THE PROPERTY OF THE CONTINUES TO THE CONTINU		
	- ;_							811 818 181
Principal Place of Business Mailing Address						, û		
5825 COLLINS AVE. 2151 LEJEUNE RD.								
APT 10-B MIAMI BCH FI	33140		STE 200 Coral Gables FL 33134			DO NOT WRITE IN THIS SPACE		
US				•.		3, Date Incorporated or Qualified 08/30/1982		
2. Principal Pi	ace of Business	2a. Maili	2a. Mailing Address			4. FEI Number	· · · · · · · · · · · · · · · · · · ·	Applied For
21		- -	26			59-2221964		Not Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				\$8.7	5 Additional
22		27				5. Certificate of Status Desired	Fee	Required
City & State)	City	City & State			6. Election Campaign Financing \$5.00 May Be		
23		28				Trust Fund Contribution Added to Fees		
Zip	Country		Zip Country		/	8. This corporation owes or has paid the current year Intangible		
24	25 29 3 2. Name and Address of Current Registered Agent		30		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent			
REN	NGOCHEA, GUSTAVO J.	em negisteren	Agent	81	Name	10, Italia alla Radiess (i New It	Spintored Agent	
2151 LEJEUNE RD. STE 200				82	Street Addr	Iress (P.O. Box Number is Not Acceptable)		
CO	RAL GABLES FL 33134							
					63			i- 0-4-
							FL	Zip Code
11. Pursuant t office or re agent I ar	o the provisions of Sections 607.0 egistered agent, or both, in the Sta in familiar with, and accept the ob	502 and 607.150 ate of Florida. Su ligations of, Sect	08, Florida S tatu ch change was ion 607.0505, F	ites, the abov authorized b lorida Statule	e-named corp y the corporat s.	poration submits this statement for the lion's board of directors. I hereby acce	purpose of changir pt the appointment	ig its registered as registered
SIGNATURE	Classitus broad or reveled page of conclused	good and bio if sonlo	able (MC	TE Registered An	ant eignature requir	red when reinstating)	DATE	
Signature, typod or printed name of registured agent and this if applicable (NO 12. OFFICERS AND DIRECTORS			13.	ent agnature regar	ADDITIONS/CHANGES TO OFFI		TORS IN 12	
TITLE	DPS DELETE		1.1 TITLE			☐ Chan		
NAME	BENGOCHEA, GUSTAVO J			1.2 NAME				
STREET ADDRESS 5825 COLLINS AVE. APT. 10-B			1.3 STREET ADDRESS		r address			
CITY-ST-ZIP	MIAMI BCH FL 33140			1.4 CITY-5	ST - ZIP			
TITLE	☐ DELETE		☐ DELETE	2.1 TITLE			Chan	ge 🔲 Addition
NAME				2.2 NAME				
STREET ADDRESS	DDAESS				r address			
CITY-S1-ZIP			551.575	2. 4 CITY - ST - ZIP			П оът	ge 🔲 Addition
TITLE			☐ DELETE	3.1 TITLE			Chan	de Mangani
NAME				3.2 NAME	4000000			
STREET ADDRESS				3.3 STREET ADDRESS 3.4. CITY - ST - ZIP				
CITY-ST-ZIP TITLE			DELETE	4.1 TITLE	SI-ZIP		☐ Chan	ge Addition
				4. 2 NAME				
NAME STREET ADDRESS					ADDRESS			
CATY-ST-ZIP				4.4 CITY - 5				
TITLE	DELETE		5.1 TITLE	77-211		Chan	ge 🔲 Addition	
NAME			5.2 NAME					
STREET ADDRESS				5.3 STREET ADDRESS				
CITY-ST-ZIP				5.4 CITY - S	ŀ			
TITLE			DELETE	6.1 TITLE			☐ Chan	ge Addition
NAME				6.2 NAME	-]
STREET ADDRESS				6.3 STREET	ADDRESS			
CITY-ST-ZIP				6.4 CITY-5				
14. I hereby c	ertify that the information supplied	with this filing d	oes not qualify	for the exemp	tion stated in	Section 119.07(3)(i), Florida Statutes.	further certify that	the information

indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a 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 in Block 12 or Block 13 if changed, or off an attachment with an address.