

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

**FILED**  
**Apr 08 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P94000006231 (2)**  
 1. Corporation Name  
**ACQUISITION CONSULTANTS, INC.**



Principal Place of Business <b>104 STONE HILL DR. MAITLAND FL 32751</b>	Mailing Address <b>104 STONE HILL DR. MAITLAND FL 32751</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <b>21 1302 W. Fairbanks Avenue</b>		2a. Mailing Address <b>26 1302 W. Fairbanks Avenue</b>		3. Date Incorporated or Qualified <b>01/26/1994</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number <b>59-3221023</b>	
22		27		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
City & State <b>23 Winter Park, FL</b>		City & State <b>28 Winter Park, FL</b>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
Zip <b>24 32789</b>		Country <b>25 Orange</b>		7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Zip <b>29 32789</b>		Country <b>30 Orange</b>			

9. Name and Address of Current Registered Agent  
**MOORE, JONATHAN A**  
**104 STONE HILL DR.**  
**MAITLAND FL 32751**

10. Name and Address of New Registered Agent  
 81 Name **Moore, Jonathan A**  
 82 Street Address (P.O. Box Number Is Not Acceptable)  
**380 Lakepark Drive ; # 202**  
 83  
 84 City **Altamonte Springs** **FL** 85 Zip Code **32701**

11. Pursuant to the provisions of Sections 607.0505 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  
 SIGNATURE: *[Signature]* DATE: **4/2/98**

12. OFFICERS AND DIRECTORS

TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>MOORE, JONATHAN A</b>	
STREET ADDRESS	<b>104 STONE HILL DR.</b>	
CITY-ST-ZIP	<b>MAITLAND FL 32751</b>	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	<b>Moore, Jonathan A</b>
1.4 CITY-ST-ZIP	<b>380 Lakepark Drive; Apt 202</b>
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	<b>Altamonte Springs, FL 32701</b>
2.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I 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 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 in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: *[Signature]* DATE: **4/2/98**

CR2E034 (10/97)