FILED

Feb 19, 1999 8:00 am Secretary of State

02-19-1999 90108 023 ***158.75

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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

,	1999	GOO WT TE	DIVISION O	F CORPORAT	IONS	02-19-1999 90108 02	23 ***158./	5
DOCUI 1. Corporation	MENT #	P960000	072041			`		
FI ORIDA	FYF CONS	SULTANTS, P.A.						
1 501115.	, E.E. 001.0	Opinitio, i.s.				i addicado ala irija riigi abail dalik rakil da	He 1 8 6 18 H all 18 1 111	E1881 (18) (88)
			_					
Principal Place	e of Business		Mailing Address				((88 4 () 4 48	81881 1181 1881
2202 S BABCOCK ST 2202 S BABCOCK ST								
STE 204			STE 204			DO NOT WRITE IN TH	IS SPACE	
MELBOURNE FL 32901 MELBOURNE FL 32901 US US					3. Date Incorporated or Qualifed	10 OF AGE		
			00			08/27/1996		·
Principal Place of Business 2a. Mailing Address						4. FEI Number	Api	plied For
21			26			59:3395074	No	t Applicable
Suite, Apt.	Suite, Apt. #, etc.		***	5. Certificate of Status Desired	\$8.75 A			
22 27						5. Certificate of Status Desired Liga	Fee Re	quired
City & State City & State				_		6. Election Campaign Financing	\$5.00	•
28						Trust Fund Contribution	Added to	o Fees
Zip	·	Country	Zip	Country 30	<i>†</i>	This corporation owes the current year Personal Property Tax.	Intangible ☑Yes	□No
24	9. Name and	Address of Current	29	30		10. Name and Address of New Registere		
	J. Hame and	Addiess of Carlo	Itagistated Pastir	81	Name	10, 1,41	<u> </u>	
	SE, GARY B			93	Ot t A dd	(C.O. Bay Number in Not Acceptable)		
930 SOUTH HARBOR CITY BLVD. STE 505					ress (P.O. Box Number is Not Acceptable)			
MELBOURNE FL 32901				83	1			
				84	City		. 85 Zip C	Code
					F	L <u> </u>		
11. Pursuant i	to the provisions	of Sections 607.0502	and 607.1508, Florida Sta	tutes, the abov	e-named corp	oration submits this statement for the purpose	of changing its	registered nistered
office or re	egistered agent	or both, in the State of	and 607.1508, Florida Sta of Florida. Such change was ons of, Section 607.0505, I	s authorized by	the corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the app	of changing its pointment as reg	registered gistered
office or re agent. I as SIGNATURE	egistered agent, m familiar with, a	or both, in the State of and accept the obligation	of Florida, Such change was ons of, Section 607.0505, I	s authorized by Florida Statutes	the corporations.	on's board of directors. I hereby accept the app	of changing its pointment as rec	registered gistered
office or re agent. I at SIGNATURE	egistered agent, m familiar with, a	or both, in the State of and accept the obligation	ons of, Section 607.0505, I and title if applicable. (No.	s authorized by Florida Statutes OTE: Registered Agei	the corporations.	on's board of directors. I hereby accept the app	oointment as reg	gistered
office or reagent. I all SIGNATURE	egistered agent, m familiar with, a	or both, in the State of and accept the obligation	ons of, Section 607.0505, I and title if applicable. (No.	s authorized by Florida Statutes	the corporations.	on's board of directors. I hereby accept the app	oointment as reg	gistered
office or reagent. I all SIGNATURE 12.	egistered agent, m familiar with, a Signature, typed or pri	or both, in the State of and accept the obligation and accept the obligation and arms of registered agent. OFFICERS AND	ons of, Section 607.0505, I and title if applicable. ODIRECTORS	s authorized by Florida Statutes OTE: Registered Agei	the corporations.	on's board of directors. I hereby accept the app	AND DIRECTO	RS IN 12
office or reagent. I all SIGNATURE 12. TITLE NAME	egistered agent, m familiar with, a Signature, typed or pri	or both, in the State of and accept the obligation and accept the obligation of registered agent of the object of	ons of, Section 607.0505, I and title if applicable. D DIRECTORS	s authorized by Florida Statutes OTE: Registered Agei 13. 1.1 TITLE 1.2 NAME	the corporations.	on's board of directors. I hereby accept the app	AND DIRECTO	RS IN 12
office or riagent, I al SIGNATURE 12. TITLE NAME STREET ADDRESS	egistered agent, m familiar with, a Signature, typed or pri	or both, in the State of and accept the obligation of registered agent of the obligation of the obliga	ons of, Section 607.0505, I and title if applicable. D DIRECTORS	s authorized by Florida Statutes OTE: Registered Agei 13. 1.1 TITLE 1.2 NAME	the corporations. It appares to the corporation of	on's board of directors. I hereby accept the app	AND DIRECTO	RS IN 12
office or reagent. I all SIGNATURE 12. TITLE NAME	egistered agent, m familiar with, a Signature, typed or pri	or both, in the State of and accept the obligation of registered agent of the obligation of the obliga	ons of, Section 607.0505, I and title if applicable. D DIRECTORS	s authorized by Florida Statutes OTE: Registered Agei 13. 1.1 TITLE 1.2 NAME 1.3 STREE	the corporations. It appares to the corporation of	on's board of directors. I hereby accept the app	AND DIRECTO	RS IN 12
office or ri agent. I al SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, m familiar with, a Signature. typed or pri D MCMANUS, A 2202 S BABO MELBOURNE D	or both, in the State of and accept the obligation of registered agent. OFFICERS AND JAMES N COCK ST, STE 204	ons of, Section 607.0505, I and title if applicable. (NC D DIRECTORS	s authorized by Florida Statutes OTE: Registered Agei 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S	the corporations. It appares to the corporation of	on's board of directors. I hereby accept the app	AND DIRECTO	RS IN 12
office or in agent. I ai SIGNATURE 12. TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE	egistered agent, m familiar with, a Signature, typed or pri D MCMANUS, 2202 S BABO MELBOURNE D SHUMAKE, C	or both, in the State of and accept the obligation of registered agent of the obligation of the obliga	ons of, Section 607.0505, I and title if applicable. (NC D DIRECTORS	s authorized by Florida Statutes OTE: Registered Agen 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME	the corporations. It appares to the corporation of	on's board of directors. I hereby accept the app	AND DIRECTO	RS IN 12
office or in agent. I ai SIGNATURE 12. TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME	egistered agent, m familiar with, a Signature, typed or pri D MCMANUS, 2202 S BABO MELBOURNE D SHUMAKE, C	or both, in the State of and accept the obligation of registered agent. OFFICERS AND JAMES N COCK ST, STE 204 EFL CHRISTOPHER S COCK ST STE 204	ons of, Section 607.0505, I and title if applicable. (NC D DIRECTORS	s authorized by Florida Statutes OTE: Registered Agen 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME	the corporations. Introduce require T ADDRESS T ADDRESS	on's board of directors. I hereby accept the app	AND DIRECTO Change	RS IN 12 Addition Addition
office or in agent. I ai SIGNATURE 12. TITLE NAME STREET ADORESS CITY_ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, m familiar with, a Signature, typed or pri D MCMANUS, 2202 S BABO MELBOURNE D SHUMAKE, C 2202 S BABO	or both, in the State of and accept the obligation of registered agent. OFFICERS AND JAMES N COCK ST, STE 204 EFL CHRISTOPHER S COCK ST STE 204	ons of, Section 607.0505, I and title if applicable. (NC D DIRECTORS	s authorized by Florida Statutes OTE: Registered Agei 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE	the corporations. Introduce require T ADDRESS T ADDRESS	on's board of directors. I hereby accept the app	AND DIRECTO	RS IN 12
office or in agent. I ai SIGNATURE 12. TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP	egistered agent, m familiar with, a Signature, typed or pri D MCMANUS, 2202 S BABO MELBOURNE D SHUMAKE, C 2202 S BABO	or both, in the State of and accept the obligation of registered agent. OFFICERS AND JAMES N COCK ST, STE 204 EFL CHRISTOPHER S COCK ST STE 204	ons of, Section 607.0505, I and title if applicable. (NO DIRECTORS DELETE	s authorized by Florida Statutes OTE: Registered Agen 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S	the corporations. Introduce require T ADDRESS T ADDRESS	on's board of directors. I hereby accept the app	AND DIRECTO Change	RS IN 12 Addition Addition
office or in agent. I ai signature 12. TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, m familiar with, a Signature, typed or pri D MCMANUS, 2202 S BABO MELBOURNE D SHUMAKE, C 2202 S BABO	or both, in the State of and accept the obligation of registered agent. OFFICERS AND JAMES N COCK ST, STE 204 EFL CHRISTOPHER S COCK ST STE 204	ons of, Section 607.0505, I and title if applicable. (NO DIRECTORS DELETE	s authorized by Florida Statutes OTE: Registered Aget 13. 1.1 TITLE 1.2 NAME 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME	the corporations. Introduce require T ADDRESS T ADDRESS	on's board of directors. I hereby accept the app	AND DIRECTO Change	RS IN 12 Addition Addition
office or in agent. I ai SIGNATURE 12. TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME NAME	egistered agent, m familiar with, a Signature, typed or pri D MCMANUS, 2202 S BABO MELBOURNE D SHUMAKE, C 2202 S BABO	or both, in the State of and accept the obligation of registered agent. OFFICERS AND JAMES N COCK ST, STE 204 EFL CHRISTOPHER S COCK ST STE 204	ons of, Section 607.0505, I and title if applicable. (NO DIRECTORS DELETE DELETE	s authorized by Florida Statutes OTE: Registered Agei 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S	the corporations. It address structure requires IT ADDRESS structure requires IT ADDRESS	on's board of directors. I hereby accept the app	AND DIRECTO Change Change	RS IN 12 Addition Addition
office or r agent. I al SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	egistered agent, m familiar with, a Signature, typed or pri D MCMANUS, 2202 S BABO MELBOURNE D SHUMAKE, C 2202 S BABO	or both, in the State of and accept the obligation of registered agent. OFFICERS AND JAMES N COCK ST, STE 204 EFL CHRISTOPHER S COCK ST STE 204	ons of, Section 607.0505, I and title if applicable. (NO DIRECTORS DELETE	s authorized by Florida Statutes OTE: Registered Agei 13. 1.1 TITLE 1.2 NAME 1.3 STREE 2.1 TITLE 22 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4. CITY-S 4.1 TITLE	the corporations. It address structure requires It Address structure requires It Address structure requires It Address structure requires	on's board of directors. I hereby accept the app	AND DIRECTO Change	RS IN 12 Addition Addition
office or in agent. I ai signature 12. Title Name Street address City-St-Zip Title Name	egistered agent, m familiar with, a Signature, typed or pri D MCMANUS, 2202 S BABO MELBOURNE D SHUMAKE, C 2202 S BABO	or both, in the State of and accept the obligation of registered agent. OFFICERS AND JAMES N COCK ST, STE 204 EFL CHRISTOPHER S COCK ST STE 204	ons of, Section 607.0505, I and title if applicable. (NO DIRECTORS DELETE DELETE	S authorized by Florida Statutes OTE: Registered Agei 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME	the corporations. It address structure requires	on's board of directors. I hereby accept the app	AND DIRECTO Change Change	RS IN 12 Addition Addition
office or in agent. I ai signature 12. Title Name Street address City-St-Zip Title Name Street address Street St	egistered agent, m familiar with, a Signature, typed or pri D MCMANUS, 2202 S BABO MELBOURNE D SHUMAKE, C 2202 S BABO	or both, in the State of and accept the obligation of registered agent. OFFICERS AND JAMES N COCK ST, STE 204 EFL CHRISTOPHER S COCK ST STE 204	ons of, Section 607.0505, I and title if applicable. (NO DIRECTORS DELETE DELETE	s authorized by Florida Statutes OTE: Registered Ages 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.2 NAME 4.3 STREE	the corporations. It appress structure requires It appress structure requires It appress structure requires It appress structure requires	on's board of directors. I hereby accept the app	AND DIRECTO Change Change	RS IN 12 Addition Addition
office or in agent. I ai signature 12. Title Name Street address City-St-Zip Title Name Street Address City-Street City-Str	egistered agent, m familiar with, a Signature, typed or pri D MCMANUS, 2202 S BABO MELBOURNE D SHUMAKE, C 2202 S BABO	or both, in the State of and accept the obligation of registered agent. OFFICERS AND JAMES N COCK ST, STE 204 EFL CHRISTOPHER S COCK ST STE 204	ons of, Section 607.0505, I and title if applicable. (NO DIRECTORS DELETE DELETE DELETE	S authorized by Florida Statutes OTE: Registered Agei 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S	the corporations. It appress structure requires It appress structure requires It appress structure requires It appress structure requires	on's board of directors. I hereby accept the app	AND DIRECTO Change Change	RS IN 12 Addition Addition Addition
office or in agent. I ai signature 12. Title Name Street adoress City-St-zip Title Name Street address City-St-zip Title Title Name Street Address City-St-zip Title Title Name Street Address City-St-zip Title	egistered agent, m familiar with, a Signature, typed or pri D MCMANUS, 2202 S BABO MELBOURNE D SHUMAKE, C 2202 S BABO	or both, in the State of and accept the obligation of registered agent. OFFICERS AND JAMES N COCK ST, STE 204 EFL CHRISTOPHER S COCK ST STE 204	ons of, Section 607.0505, I and title if applicable. (NO DIRECTORS DELETE DELETE	S authorized by Florida Statutes OTE: Registered Agei 13. 1.1 TITLE 1.2 NAME 1.3 STREE 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.1 TITLE 4.2 NAME 5.1 TITLE 5.1 TITLE	the corporations. It appress structure requires It appress structure requires It appress structure requires It appress structure requires	on's board of directors. I hereby accept the app	AND DIRECTO Change Change	RS IN 12 Addition Addition
office or in agent. I ai signature 12. Title Name Street adoress City-St-zip Title Name Street address City-St-zip Title Name	egistered agent, m familiar with, a Signature, typed or pri D MCMANUS, 2202 S BABO MELBOURNE D SHUMAKE, C 2202 S BABO	or both, in the State of and accept the obligation of registered agent. OFFICERS AND JAMES N COCK ST, STE 204 EFL CHRISTOPHER S COCK ST STE 204	ons of, Section 607.0505, I and title if applicable. (NO DIRECTORS DELETE DELETE DELETE	S authorized by Florida Statutes OTE: Registered Agei 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 3.3 STREE 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME	the corporations. It address structure requires	on's board of directors. I hereby accept the app	AND DIRECTO Change Change	RS IN 12 Addition Addition Addition
office or in agent. I ai signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, m familiar with, a Signature, typed or pri D MCMANUS, 2202 S BABO MELBOURNE D SHUMAKE, C 2202 S BABO	or both, in the State of and accept the obligation of registered agent. OFFICERS AND JAMES N COCK ST, STE 204 EFL CHRISTOPHER S COCK ST STE 204	ons of, Section 607.0505, I and title if applicable. (NO DIRECTORS DELETE DELETE DELETE	S authorized by Florida Statutes OTE: Registered Agei 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE 5.3 STREE 5.3 STREE	the corporations. It appreciates the corporations of the corporation of the corporat	on's board of directors. I hereby accept the app	AND DIRECTO Change Change	RS IN 12 Addition Addition Addition
office or in agent. I ai signature 12. TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, m familiar with, a Signature, typed or pri D MCMANUS, 2202 S BABO MELBOURNE D SHUMAKE, C 2202 S BABO	or both, in the State of and accept the obligation of registered agent. OFFICERS AND JAMES N COCK ST, STE 204 EFL CHRISTOPHER S COCK ST STE 204	ons of, Section 607.0505, I and title if applicable. (NO DIRECTORS DELETE DELETE DELETE	S authorized by Florida Statutes OTE: Registered Agei 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 3.3 STREE 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME	the corporations. It appreciates the corporations of the corporation of the corporat	on's board of directors. I hereby accept the app	AND DIRECTO Change Change	RS IN 12 Addition Addition Addition
office or in agent. I ai signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, m familiar with, a Signature, typed or pri D MCMANUS, 2202 S BABO MELBOURNE D SHUMAKE, C 2202 S BABO	or both, in the State of and accept the obligation of registered agent. OFFICERS AND JAMES N COCK ST, STE 204 EFL CHRISTOPHER S COCK ST STE 204	ons of, Section 607.0505, I and title if applicable. (NO DIRECTORS DELETE DELETE DELETE DELETE	S authorized by Florida Statutes OTE: Registered Agei 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S 5.5 STREE 5.5 CITY-S	the corporations. It appreciates the corporations of the corporation of the corporat	on's board of directors. I hereby accept the app	AND DIRECTO Change Change Change	RS IN 12 RS IN 12 Addition Addition Addition Addition

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 any attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

CITY-ST-ZIP