

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
 Sep 17 1998 8:00am
 Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
 Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # [REDACTED] P97000101016
 1. Corporation Name
 INTERACTIVE TRAINING GROUP, INC.

Principal Place of Business Mailing Address
 2400 N. FORSYTH RD. STE. 201
 ORLANDO, FL 32807

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address
 21 SAME 26 SAME
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 22 NA 27 NA
 City & State City & State
 23 NA 28 NA
 Zip Country Zip Country
 24 NA 25 NA 29 NA 30 NA

3. Date Incorporated or Qualified
 November 25, 1997
 4. FEI Number Applied For
 58-3526806 Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required
 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
 7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 Yes No

9. Name and Address of Current Registered Agent
 BURT ALAN TEPLITZKY
 2400 N. FORSYTH RD. STE 201
 ORLANDO, FL 32807

10. Name and Address of New Registered Agent
 81 Name N/A
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 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 Burt Alan Teplitzky 9/10/98
Signature typed or printed name of registered agent and filer, if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

12. OFFICERS AND DIRECTORS

TITLE	PRESIDENT	<input type="checkbox"/> DELETE
NAME	BURT TEPLITZKY	
STREET ADDRESS	2400 N. FORSYTH RD STE 201	
CITY-ST-ZIP	ORLANDO, FL 32807	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	600002650866
4.3 STREET ADDRESS	-09/29/98--01007--006
4.4 CITY-ST-ZIP	***150.00
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	600002650866
5.3 STREET ADDRESS	-09/29/98--01007--007
5.4 CITY-ST-ZIP	***8.75
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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: Burt Teplitzky BURT TEPLITZKY 9/10/98 407 679-4440

CP2E034 (5/98)

(2)

Interactive Training Group, Inc.

2400 N. Forsyth Rd., Suite 201 Orlando, FL 32807 (407) 679-4440 Fax: (407) 679-3379

9/9/98

Annual Reports Filings
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Annual Report for Interactive Training Group, Inc
EIN: 58-3526806 Document #: P970001016

Ladies and Gentlemen:

Interactive Training Group, Inc. is requesting consideration for being late with the 1998 annual report. We never received our first notice of the annual report. This is our first year of being in business and we did not realize this responsibility until our second notice was sent to us.

Enclosed is the \$150 filing fee. Thank you for your time and consideration.

Sincerely,



Burt Teplitzky
President
Interactive Training Group, Inc.