

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # S22726 (1)

1. Corporation Name
PHOENIX ADVISORY SERVICES, INC.



Principal Place of Business: CENTURY VILLAGW, 192 WESTBURY K, DEERFIELD BEACH FL 33442-3225
Mailing Address: CENTURY VILLAGW, 192 WESTBURY K, DEERFIELD BEACH FL 33442-3225

3. Date Incorporated or Qualified: 01/04/1991
3a. Date of Last Report: 06/21/1995

2. Principal Place of Business (21), 2a. Mailing Address (26), Suite, Apt. #, etc. (22), City & State (23), Zip (24), Country (25)

4. FEI Number: 65-0246860
Applied For: 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
8. This corporation has liability for intangible tax under s 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
GRUNBERG, SOFIA
CENTURY VILLAG
1921 WESTBURY K
DEERFIELD BEACH FL 33442

10. Name and Address of New Registered Agent
81 Name: ADRIAN ALEXANDER
82 Street Address (P.O. Box Number is Not Acceptable): CENTURY VILLAG
83: 192 WESTBURY K
84 City: DEERFIELD BEACH FL 85 Zip Code: 33442

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 607.0605, Florida Statutes.

SIGNATURE: Adrian Alexander (Signature)
NOTE: Registered Agent signature required when reinstating
DATE: 3/30/96

12. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	GRUNBERG, SOFIA	
STREET ADDRESS	192 WESTBURY K,	
CITY-ST-ZIP	DEERFIELD BCH FL	
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	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	ADRIAN ALEXANDER	
1.3 STREET ADDRESS	192 WESTBURY K	
1.4 CITY-ST-ZIP	DEERFIELD BEACH FL 33442	
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		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	7000001769637	
6.3 STREET ADDRESS	-04/04/96--01080--000	
6.4 CITY-ST-ZIP	***200.00	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Adrian Alexander - President
DATE: 3/12/96
TIME: 205-4273750

CR2E034 (12/95)