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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V24534

KMZ CONSULTANT GROUP, INC.

(2)

FILED May 01 1997 8:00am Secretary of State

Principal Place of Business Mailing Address					T TOWN CHAIN DIGHT DIGHT DIGHT DIGHT DIGHT GIGHT DIGHT DIGHT GIGHT DIGHT DIGHT DIGHT DIGHT		
8000 PETERS RD. PLANTATION FL 33324 US		6000 PETERS RD. Plantation FL 33324-4030 US					
					3. Date Incorporated or Qualified 03/24/1992	3a. Date of Last Re 08/06/1996	port
	ace of Business	2a. Mailing Address			4. FEI Number	——+——	olied For
21 Suite Apt # etc		26	Suite, Apt. #, etc.		65-0329515		Applicable
Suite, Apt. #, etc.		<u> </u>		5. Certificate of Status Desired See Required			
City & State		Cily & State	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 has liability for i		
24	25	29	30		· · · · ·	Yes 🖼 No	
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Re	gistered Agent	
WEI	NBERG, STEVEN A ESQ.		81	Name			
	PETERS RD		82 Street Ac		Idress (P.O. Box Number is Not Acceptable)		
PLAI	NTATION FL 33324						
			83				
			84	City		FL 85 Zip C	ode
44 Diwayanti	to the previolence of Continue 607 OF	03 and 607 1509. Florida Statuto	e the abou	o powed ear	peration submits this statement for the p		rogistored
office or re	egistered agent, or both, in the State	e of Florida. Such change was a	uthorized b	v the corpora	ation's board of directors. Thereby accep	of the appointment as r	egistered
=	m familiar with, and accept the obliq	jations of, Section 607,0505, Floi	rida Statute	S.			
SIGNATURE	Signature, typod or printed name of registered ag	ient and to cil applicable (NOTE	Registered Ag	ent signature requ	uited when reinstaling)	DATE	
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS	IN 12
TITLE	D	☐ DELETE	1.1 TITLE			Change Change	Addition
NAME			1.2 NAME				
STREET ADDRESS	137 SW 100 TERRACE		1.3 STREE	ADDRESS			
CITY-ST-ZIP			1.4 CHTY - S	S1 - ZIP			
TITLE		☐ DELETE	2 TITLE			Change	Addition
NAME			2, NAME		-		
STREET ADDRESS			2 STRFF	ADORESS			
CITY-ST-ZIP		DEL CTC	2 CITY - ST - 7IP			Channe	T Addison
TITLE		DELETE	3 .TITLE			Change	Addition
NAME			3 NAME				
STREET ADDRESS			18	I ADDRESS			
CITY-ST-ZIP	DELFTE		3 CHY-	S1-ZIP		Change	Addition
NAME	Ditt it		NAME				
				I ADDRESS			
STREET ADDRESS CITY-ST-ZIP				ST - ZIP			
TITLE	DELETE		UTLE	31 - ZH		Change	Addition
NAME			NAME			- - •	
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP				ST - ZiP			
TITLE	☐ DELETE		nut		ALL ALL THE STATE OF THE STATE	☐ Change	Addition
NAME			HAME	1			
STREET ADDRESS			TREE	T ADDRESS			
CITY-ST-ZIP			DITY-	S1-ZIP			
14. I do herel	by certify that the information supplies indicated on this applies to part or			emption state	ed in Section 119.07(3)(i), Florida Statute at my signature shall have the same lega	s. I further certify that t	he for oath, that
l lem an o	in indicated on this annual report or fficer or director of the corporation on In Block 12 or Block 13 if changed, i	or the receiver or trustee employe	ered exe	cute this rep	ort as required by Chapter 607, Florida S	Statutes; and that my na	ame