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

PROFIT CORPORATION ANNUAL REPORT

1997



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 684921

ALCO INVESTMENT & CONSULTING SERVICES, INCORPORA TED

Principal Prace of Business Mailing Address C/O J. WALTON ALFRED C/O J. WALTON ALFRED 15340 SW 78 COURT 15340 SW 78 COURT MIAMI FL 33157-2364 MIAMI FL 33157 3. Date Incorporated or Qualified 3a. Date of Last Report 08/21/1980 02/05/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 59-2030397 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Ζφ Country 8. This corporation has liability for intendible tax under s. 199.032, Yes No 29 30 Florida Statutes 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ALFRED. J. WALTON 15340 SW 78 CT 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL** 83 84 City 85 Zip Code 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 607.0505, Florida Statutes. SIGNATURE Signature, type disciponited mane of region of signs and title diapple take. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 96/6) DELETE Change 1.1 TITLE Addition TITLE ALFRED, J. WALTON NAME 1.2 NAME 15340 SW 78 CT 1.3 STREET ADDRESS STREET ADORESS MIAMI FL CITY-ST-ZIE 1.4 CITY-ST-ZIP DELETE DST ___ Change Addition TITLE 2.1 TITLE ALFRED, ROSA L NAME 2.2 NAME 15340 SW 78 CT 2.3 STREET ADDRESS STREET ADORESS MIAMI FL 2. 4 CITY-ST-ZIP CITY - ST - 20F DELETE Change Addition 3.1 THEF TITLE MAME 3.2 NAME 3.3 STREET ADDRESS STREET ADORESS QITY-ST-ZII 3 4. CITY - ST - ZIP DELETE Change Addition 4 1 THUE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS SUBJECT ADDRESS City-IST 2IP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 51 TITUE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDIRESS CITY - ST- 2IF 5.4 City - St - ZiP DELETE Change Addition 6.1 TITLE TITLE

NAME

STREET ADDRESS

OTY-\$1-2IP

appears in Block 12 or Block 13 if changed, or on an attachment with an address.

6.2 NAME 6.3 STREET ADDRESS

14. I do 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

6.4 CITY - ST - ZIP

information inclicated 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

J. W. ALFRED JAN. 7, 1987

FILED

Jan 21 1997 8:00am

Secretary of State