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).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 694

(4)

CORPORATE SECURITIES GROUP, INC.

FILED Jul 16 1998 8:00am Secretary of State

|--|--|--|--|--|--|--|--|

Principal Plac	e or Business	Mailing Address	Mailing Address			
	EDERAL HIGHWAY	990 NORTH FEDERAL HIG	3HWAY			
SUITE 110 BOCA RATON	E1 00400	SUITE 110			DO NOT WRITE IN THIS SPACE	
BOOK MATON	FL 33432	BOCA RATON FL 33432			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
					07/16/1981	
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			59-2617265	Not Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.				\$8.75 Additional
22		27			5. Certificate of Status Desired	Fee Required
City & Stat	le	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28	28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	/	8. This corporation owes or has paid the	current year Intangible
24	25	29	30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Current	t Registered Agent		,	10. Name and Address of New Registe	red Agent
	CORPORATION SYSTEM		81	Name		
1200	O SOUTH PINE ISLAND ROAD		82	Street Add	dress (P.O. Box Number Is Not Acceptable)	·
PLAI	NTATION FL 33324					
	÷		83			
	i.		84	City		85 Zip Code
11. Pursuant	to the mandalous of aution 607 0500			<u> </u>		FL 65 210 COOE
office or	registered agent, or both, in the State	า and 607.1508, Florida Statut of Florida. Such change was	es, the above authorized by	-named corporat	oration submits this statement for the purpose tion's board of directors. I hereby accept the a	of changing its registered populations as registered
agent. I a	am fa mi llar with, and accept the obliga	tions of, section 607.0505, FI	lorida Statute	s.	•	
SIGNATURE	Signature, typed or printed name of registered agent	and title if poplicable (At	MTE: Pasistared A	annt elegature re-	quired when reinstating) DA	
12.	OFFICERS AND		13.	dour elânstore lec	ADDITIONS/CHANGES TO OFFICERS	
TITLE	PD	DELETE	1.1 TITLE			Change Addition
NAME	LEEDS, MARSHALL	<u></u>	1.2 NAME			Ollange Addition
STREET ADDRESS	980 N FEDERAL HWY., #210		1.3 STREET	ADDRESS		
CITY-ST-ZIP	BOOA RATON FL 33432		1.4 CITY-\$1			
TITLE	VP T	DELETE	2.1 TITLE			Change Addition
NAME	DORADO, COLETTE		2.2 NAME			C. Outsingo C. Modikoli
STREET ADDRESS	980 N FEDERAL HWY #210		2.3 STREET	ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33432		2.4 CITY-S1	r-ZIP		
TITLE	VS	DELETE	3.1 TITLE			Change Addition
NAME	WA G NER, JOYCE	<u> </u>	3.2 NAME			shought ndupoit
STREET ADDRESS	980 N FEDERAL HWY #210		3.3 STREET	ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33432		3.4 CITY-\$1	r-ZIP		
TITLE	VDT.	DELETE	4.1 TITLE			Change Addition
NAME	GLASER, GREGG		4.2 NAME			
STREET ADDRESS	980 N FEDERAL HWY 210		4.3 STREET	ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33432		4.4 CITY-S1	r-ZIP		
TITLE	VD ÷	DELETE	5.1 TITLE			Change Addition
NAME	MARKS, JOEL		5.2 NAME			
STREET ADDRESS	1117 PERIMETER CENTER W. #	¥500E	5.3 STREET	ADDRESS		
CITY-ST-ZIP	ATLANTA GA 30338		5.4 CITY-ST	-ZIP		
TITLE	VD	DELETE	6.1 TITLE			Change Addition
NAME	FERGUSON, DENNIS W		6.2 NAME			
STREET ADDRESS	980 NORTH FEDERAL HIGHWAY	Y, STE. 210	6.3 STREET	ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33432		6.4 CITY-S1			

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.

CR2E034 (5/98