

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

FILED

May 13 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 # 838200 (4)
1. Corporation Name
FINANCIAL DATA PLANNING CORP.



Principal Place of Business
2140 SO. DIXIE HWY.
MIAMI FL 33133

Mailing Address
2140 SO. DIXIE HWY.
MIAMI FL 33133

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 04/11/1977	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-1284646	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent GOLDBERG, MICHAEL 8555 PONCE DE LEON ROAD MIAMI FL				10. Name and Address of New Registered Agent	
				81	Name
				82	Street Address (P.O. Box Number is Not Acceptable)
				83	
				84	City
				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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CEO	1.1 TITLE	D
NAME	GOLDBERG, MICHAEL C.	1.2 NAME	60411F, ALBERT
STREET ADDRESS	8555 PONCE DE LEON ROAD	1.3 STREET ADDRESS	263 TRESSER BLVD, 10TH FLOOR
CITY-ST-ZIP	MIAMI, FL 00000	1.4 CITY-ST-ZIP	STAMFORD, CT
TITLE	V	2.1 TITLE	V
NAME	MURO, KATHLEEN	2.2 NAME	PRICE, BEVERLY
STREET ADDRESS	407 S.E. 7 STREET	2.3 STREET ADDRESS	5600 SW 95 ST
CITY-ST-ZIP	DANIA FL	2.4 CITY-ST-ZIP	MIAMI, FL
TITLE	STD	3.1 TITLE	V
NAME	GOLDBERG, CINDY	3.2 NAME	PRICE, SOUT
STREET ADDRESS	8555 PONCE DE LEON ROAD	3.3 STREET ADDRESS	5600 SW 95 ST
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	MIAMI, FL
TITLE	V	4.1 TITLE	D
NAME	STROUD, CHRISTINE	4.2 NAME	NICKENBERG, BRUCE
STREET ADDRESS	7420 SW 162ND ST	4.3 STREET ADDRESS	774 GLENGARRY DR
CITY-ST-ZIP	MIAMI FL	4.4 CITY-ST-ZIP	MELBOURNE, FL
TITLE	EVD	5.1 TITLE	D
NAME	KENNEDY, DOUGLAS	5.2 NAME	ALVAREZ, CESAR
STREET ADDRESS	12940 CORONADO TERR.	5.3 STREET ADDRESS	1221 BRICKELL AVE, 22ND FLOOR
CITY-ST-ZIP	N. MIAMI FL	5.4 CITY-ST-ZIP	MIAMI, FL
TITLE	V	6.1 TITLE	V
NAME	FLEISHMAN, RICHARD	6.2 NAME	SILVERMAN, MARK
STREET ADDRESS	75 BREAKNECK HILL RD.	6.3 STREET ADDRESS	8110 LAKEWOOD CIR
CITY-ST-ZIP	SOUTHBORO MA 01772	6.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33332

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 in an attachment with an address.

CR2E034 (10/97)