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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # F9300005551 (7)

CONSOLIDATED INTERNATIONAL GROUP, INC. Principal Place of Business Mailing Address 1415 FOULK ROAD 1415 FOULK ROAD FOULKSTONE PLAZA, STE, 100 FOULKSTONE PLAZA, STE. 100 WILMINGTON DE 19803-2727 WILMINGTON DE 19803 3. Date Incorporated or Qualified 3a. Date of Last Report 12/07/1993 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 51-0340034 26 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional П 5. Certificate of Status Desired Suite 205 Fee Required Suite 205 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Z_{10} Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 61 Name CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 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 it am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typind or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. (96/6) 12 CEO DELETE Change 11 TITLE THILE ROTHMAN, ROBERT 1.2 NAME NAME 100 N. TAMPA STREET, SUITE 3600 1.3 STREET ADDRESS 16057 Tampa Blvd. W., Box 198 STREET ADDRESS TAMPA FL Tampa, FL 333647 1.4 CITY-ST-ZIP CHY-51-21F SVPT XX DELETE 2.1 TITLE THIE AUGER, MICHAEL C. 2.2 NAME Charles L. Beale NAMI 100 N. TAMPA STREET, SUITE 3600 STREET ADDRESS 2.3 STREET ADDRESS 1415 Foulk Rd., Foulkstone Plaza, #205 Wilmington, DE 19803 TAMPA FL 2. 4 CITY-ST-ZIP CH14 - S1 - 7IP DELETE 3.1 TITLE TITLE BUCHANAN, KIM P 3.2 NAME NAME 100 N. TAMPA STREET, SUITE 3800 6211 Emmons Lane 3.3 STREET ADDRESS STREET ACHDRESS TAMPA FL Tampa, FL 33647 CITY ST-ZIP 3.4. CITY+ST-ZIP DELETE Addition 4.1 TITLE TRUE PC00 YOUSSEF, SHAKER A 4. 2 NAME NAME 1415 FOULK ROAD, FOULKSTONE PLAZA, #100 4.3 STREET ADDRESS 1415 Foulk Rd., Foulkstone Plaza, #205 STREET ADDRESS WILMINGTON DE 19803-2766 CITY - ST - ZIP 44 CiTY - ST - ZIP DELETE Change TILLE VCD 5.1 TITLE GIBBS, THOMAS E 5.2 NAME NAME 50 N. LAURA ST., 28TH FL. 5.3 STREET ADDRESS STREET ADORESS. JACKSONVILLE FL 5.4 CiTY - ST - ZIP CHY-SI-74P **VPS** 61 TITLE 1005 VOSS, DEANNA 6.2 NAME NAME 1415 FOULK ROAD, SUITE 100 1415 Foulk Rd., Foulkstone Plaza, #205 6.3 STREET ADDRESS STREET ADDRESS. **WILMINGTON DE** Wilmington, DE 19803 City-St ZiP 6.4 CITY - ST - ZIP

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 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 3 if changed, or on an attachment with an address.

SIGNATURE:

THE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/97

(302) 477-5900

FILED

May 02 1997 8:00am

Secretary of State

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