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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

**DOCUMENT #** F94808 (5)

	Name CONSULTING CORPORAT	TION					
Principal Place c	of Business	Mailing Address			I HOUIDA AID INIM DIODI MINI DI		INDIA DIDIA DIDIA NODI
444 BRICKELL AVE.  SUTIE 51-511  MIAMI FL 33131  444 BRICKELL AVE.  SUTIE 51-511  MIAMI FL 33131							
MIAMI FL 33131		MIRMI FL 30131	MIAMI FL 33131		<ol> <li>Date incorporated or Qualified 08/13/1982</li> </ol>	3a. Date of Last 10/09/	•
2. Principal Plac	ce of Business	2a. Mailing Address			4. FEI Number		Applied For
<u> </u>		26			59-2245752	60.	Not Applicable
Suite, Apt. #,	, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired		75 Additional e Required
Oity & State		City 8 State			6. Election Campaign Financing	_ \$5	.00 May Be
		28			Trust Fund Contribution	□ Ad	ded to Fees
<b>Ζ</b> φ:	Gountry	Zip	Cour	ntry	8. This corporation has liability for	rintangible tax under s	s 199.032,
·I	25 9. Name and Address of Curre	29 nt Registered Agent	30		Florida Statutes Yes  10. Name and Address of New I		
	g, mano and recorded of control			81 Name			
MORALES, ANNELIESE				82 Street Addr	ress (P.O. Box Number is Not Acceptal	ble)	
	RICKELL AVE., APT. D1607			oz Street Audi	1955 (F.O. DOX NUMBER IS NOT ACCEPTED	<i></i>	
MIAMI F				83			
				84 City	<del></del>	85	Zip Code
			,			<u> </u>	·
or registere	o the provisions of Sections 607.0503 diagent, or both, in the State of Flor is and accept the obligations of, Sec	ida. Such change was authoriz	zed by the o	orporation's boa	ration submits this statement for the purify of directors. I hereby accept the app	prose of changing it pointment as register	red agent. I am
SIGNATURE .			warra siiri	والمراه المرجم المرام	· angala · · · · · · · · · · · · · · · · · ·		
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certity 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 or Block 13 or open attachment with an address. ANNELIESE MORALES 2/2/96
SIGNING OFFICER OR DIRECTOR

SIGNATURE: (