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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F96000002174 (8)

NATIONAL PACESETTERS, INC.

Principal Place of Business

Mailing Address

500 W CYPRESS CREEK RD., STE 410

500 W CYPRESS CREEK RD., STE 410

FILED Jan 21 1998 8:00am Secretary of State



FI LAUDERDAI	LE FE 33308	FI LAUDERDALE FL 333	U9	DO NOT WRITE IN THIS SPACE	
1				3. Date Incorporated or Qualified	
				05/01/1996	
2. Principal Pla	ice of Business	2a. Mailing Address		4. FEI Number Applied For	
Suite, Apt. #	oto	Suite, Apt. #, etc.	/ · / · · · · · · · · · · · · · · · · ·	65-0660672 Not Applical	ole
22	, 616,	27 Suite, Apr. #, etc.		5. Certificate of Status Desired \$8.75 Additional Fee Required	
City & State		City & State			_
23		28		6. Election Campaign Financing \$5.00 May Be 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	Registered Agent		10. Name and Address of New Registered Agent	
	ULTZ, MICHAEL E		81 Name		
	W CYPRESS CREEK ROAD		82 Street	Address (P.O. Box Number is Not Acceptable)	
STE 410				,	
FT L	AUDERDALE FL 33307		83		
			84 City	FI 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 _	tarring tros and doopt the bongan	0113 04, 00011011 007.0000, 110	ilida Olaldies.		
SI	gnature, typed or printed name of registered agent		. Registered Agent signature	required when reinstating) DATE	- 1
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PCSD	☐ DELETE	1.1 TITLE	☐ Change ☐ Additi	on
NAME	SCHULTZ, MICHAEL E		1.2 NAME		
STREET ADDRESS	500 W CYPRESS CREEK RD.		1.3 STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL		1.4 CITY-ST-ZIP		
TITLE	V ICAN	☐ DELETE	2.1 TITLE	Change L. Additi	on
NAME	BARRY, JEAN		2.2 NAME		Ī
STREET ADDRESS	500 W CYPRESS CREEK RD. FT LAUDERDALE FL		2.3 STREET ADDRESS		İ
CITY-ST-ZIP	FI LAUDENDALE FL	T pri pre	2. 4 CITY+ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addith	an
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CiTY-ST-ZiP		DELETE	3.4. CITY-ST-ZIP	- Channe	
TITLE		☐ DECEIE	4.1 TITLE	Change Addition	JFI
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP	· ·	DELETE	4.4 CITY-ST-ZIP	L Characteristics	_
TITLE		☐ DECEIE	5.1 TITLE	Li Change Li Addition	ן חנ
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		[Table of the content	5.4 CITY-ST-ZIP	Tab Fl	_
TITLE		DELETE	6,1 TITLE	Change Addition	חכ
NAME			6.2 NAME		- }
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	tifu that the information quantical with	this filing does not availfy fo	6,4 CITY-ST-ZIP	d in Section 119 07(3)(i) Florida Statutes I further certify that the information	_

I hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 19.07(5)(i), Frortica Statutes, I turner certify into indicated on this annual report or suppliemental 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 emporared special this report as required by Chapter 607, Florida Statutes; and that my name appears in