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

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F9600003089 (7)

ENGEL CONSULTING, INC.

Principal Place of Business

Mailing Address

## **FILED** Apr 29 1997 8:00am Secretary of State



187 N. RIDGE ROAD LAKE FOREST IL 60045		187 N. RIDGE ROAD LAKE FOREST IL 60045-2049					
					3. Date incorporated or Qualified 06/17/1996	3a. Date of Las	Report
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	h	Applied For
21	N. de	26			36-3800037	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Cortificate of Status Desired	\$8.75 Additional Fee Required		
City & State	9	City & State			6. Election Campaign Financing		May Be
23		28			Trust Fund Contribution		d to Fees
Zip	Country	7 <sub>(P</sub>	Cour	ılry	8. This corporation has liability for it		
24	25	29	30		Florida Statutes	Yes No	
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Reg	gistered Agent	
	EL, RK			B1 Name			
	COTTESMORE CIRCLE W		82 Street Ad		dress (P.O. Box Number is Not Acceptab	le)	
LON	IGWOOD FL 32778		}.			····································	
				83			
				84 City		B5 Z	p Code
dd Dunnings	to the pendidon of Onether COZ OS	on a con those the contract		aug population	For a positional state of the s	FL   69   6	ito rocietado
11. Pursuant i	to the provisions of Sections 607.050 egistered agent, or both, in the State	⊮ and 697, 1908, Florida Stati e of Florida, Such change was	authorized	ove named cor by the corpora	poration submits this statement for the pation's board of directors. I hereby accep	urpose or changing of the appointment	j its registered as registered
agent. I a	m familiar with, and accept the oblig	ations of, Section 607.0505, F	Torida Statu	ites.			
SIGNATURE	Signature typed of printed name of regulated ag	est and the damake able OSC	1D : Registered	Apent signal up rozu	ured when reinstating)	DA11:	
12.		D DIRLCTORS	13.	Marie aldinas e rede	ADDITIONS/CHANGES TO OFFIC		ORS IN 12
TITLE	POST	DELETE	1.1 101	.ε		Chang	
NAME	ENGEL, ANDRE L		1.2 NAI	AC			
STREET ADDRESS	187 N. RIDGE ROAD		1.3 STH	EFT ADDRESS			
CITY-ST-ZIP	LAKE FOREST IL 60045		1.4 CII	Y-S1-7IP			
TITLE	VČ	☐ DELFTE	2.1 1111	.F		Chang	e 🔲 Addition
name	ENGEL, PAMELA T		2 2 NA	ME			
STREET ADDRESS	187 N. RIDGE ROAD		2 3 \$18	REET ADDRESS			
CITY-ST-ZIP	LAKE FOREST IL 60045		2 4 01	Y-ST-ZIP			
TITLE		DELETE	3.1 [1]	LE		Chang	e 🔲 Addition
NAME			3.2 NA	1			
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CITY-ST-ZIP		herese.		Y-SI-ZIP			
TITLE		☐ DELETE	4.1 7(1)	!		Chang	e
NAME			4. 2 NA				
STREET ADDRESS			1	ETT ADDRESS			
CITY-ST-ZIP TITLE		DELETE	5.1 TIT	Y-ST-ZIP		Chang	e Addition
		L) Witte					o LI nacioni
NAME STREET ADDRESS			5.2 NAI	RELI ADDRESS			
CITY-ST-ZIP TITLE		DELFTE	61 Till	Y-S1-7IP		Chang	e Addition
NAME		but 10	6 2 NA	)			Lad Addition
STREET ADDRESS				VII: KEET ADDRESS			
CITY-ST-ZIP				Y-S1-20P			
UHI - 31.44	İ		■ 0.4 GH	1.21.50			

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 logal effect as if made under eath; 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.