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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G06788 (5)

FILED Feb 17 1998 8:00am Secretary of State

A M S/	ALES MOTIVATORS, INC.				
Principal Place of Business 11800 S ISLAND RD COOPER CITY FL 33139-0907 US		Mailing Address 11800 S. ISLAND RD. COOPER CITY FL 33026-1216 US		DO NOT WRITE IN THIS SPACE	
				 Date Incorporated or Qualified 10/29/1982 	
2. Principal P	lace of Business	2a. Mailing Address 26		4. FEI Number 59-2243187	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	θ	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	28 Zip	Country	Trust Fund Contribution	Added to Fees
24	25	29	30	This corporation owes or has paid the Personal Property Tax due June 30.	Current year intangible
	9. Name and Address of Curren	nt Registered Agent		10. Name and Address of New Register	ed Agent
118	CKELSON, ARTHUR J. 800 S. ISLAND RD. DOPER CITY FL 33026		82 Street Address 83 Street Address 84 City	ess (P.O. Box Number is Not Acceptable)	85 Zip Code
11. Pursuant office or ragent. I a	to the provisions of Sections 607.050 registered agent, or both, in the State in familiar with, and accept the obligations typed or profess transport registered age.	ations of, Section 607.0505, Fit	es, the above-named corp authorized by the corporationida Statutes.	oration submits this statement for the purposion's board of directors. I hereby accept the a	e of changing its registered appointment as registered
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PSO	DELETE	1.1 TITLE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Change Addition
NAME	MICKELSON, ARTHUR		1.2 NAME		
STREET ADDRESS	11800 S. ISLAND ROAD		1.3 STREET ADDRESS		
CITY-ST-ZIP	COOPER CITY, FL 33026		1.4 CITY-ST-ZIP		
TITLE	V	☐ DELETE	21 TITLE		☐ Change ☐ Addition
NAME	MICKELSON, LOIS 11800 S. ISLAND ROAD		2.2 NAME		
STREET ADDRESS	COOPER CITY, FL 33026		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	000121101111120020	DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		Change Addition
NAME			32 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		}
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS)
CITY-ST-ZIP		- <u> </u>	4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		T brief	5 4 CITY-ST-ZIP		[
TITLE		DELETE	61 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	certify that the information suppliers wi	ith this films does not qualify fo	6.4 CITY-ST-ZIP	Section 119.07(3)(i). Florida Statutes. I further	certify that the information

indicated on this annual report or supporting of the corporation of the corporation of Block 12 or Block 13 if changed, of or or is to e and accurate and that my signature shall have the same legal effect as if made under oath; that I am an ic or some of the control of the control

SIGNATURE:

2-10-98