FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham

Socretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # G90010

(1)

1. Corporation Name REGULATED INDUSTRY CONSULTANTS, INC. Principal Place of Business Mailing Address 766 NE 96 STREET P O BOX 530503 P O BOX 530503														
MIAMI SHORES FL 33138				MIAMI SHORES FL 33138				3. Date incorporated or Qualified 3a. Date of Last Report 09/29/1995						
	Principal Place of Business									<u> </u>		· · · · · · · · · · · · · · · · · · ·		
2. 21	Principal Pla	nincipal Place of Business			2a. Mailing Address				4. FEI Number 59-2372297		·	Applied For Not Applicable		
لـــــــــــــــــــــــــــــــــــــ	Suite, Apt. #, etc.				Suite, Apt. #, etc.								5 Additional	
22					7				5. Certificate of Status Desired		•	Required		
L,	City & State			-	City & State				6. Election Campaign Financing		\$5.0	0 May Be		
23	~	ip Country			Zip Country				Trust Fund Contribution			ed to Fees		
24	Ζιρ	25			Zip Cc			у		8. This corporation has liability for Florida Statutes	intangible t □ No	ax under s	199.032,	
<u> </u>		9. Name and Address of Curre			stered Agent		' 1			10. Name and Address of New I		Agent		
							81	ı	Name					
		BARRY K						+	Street Addre	ess (P.O. Box Number is Not Acceptal	ole)			
515 N.E. 101 STREET MIAMI SHORES FL 33138-2410								1						
								3						
							84	Ť	City		FL	85 2	ip Code	
familiar with, and accept the obligations of, Section 607.0505, Florida Sta SIGNATURE. Stgrature typed or printed name of registered against and title if applicable. OFFICERS AND DIRECTORS							TE Registered Agont signature recou			wheri reinstating! ADDITIONS/CHANGES TO OFF	DATE	D DIRECTO	ORS IN 12	
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l	REET ADDRESS						63 STREE							
	Y-S1-ZIP L. Ldo bereb	L certify that	the information supplied	with this	s filing is voluntarily fur	nished	64 CITY-			or the exemption stated in Section 119	.07(3)(k), Flo	orida Statu	rtes 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 contration or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 13 if changed for or an attachment with an address.

SIGNATURE:

DAME LASTUS BARRY K. ASTUS

April 24, 1996 (305) 757-0000

CR2E034 (12/95)