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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

OCUMENT #

1. Corp	oration Name NT CONSUL	1 14- 1		(1)							H 8 1811 1481
Principal Place of Business Mailing Address									DIN BABAH BUBIH B		A DIBILIANI
LAKE WORTH FL 33462-4057 LA				1830 HYPOLUXO RD #B LAKE WORTH FL 33462-4057 US				DO NOT WRITE IN THIS SPACE			
								3. Date Incorporated or Qualified			
A Date -	2. Principal Place of Business 2a. Mailing Address							09/19/1984		1 1.	
_	ipai Place of Busi	ness	├ ─¬	2a. Mailing Address				4. FEI Number			pplied For
Suite, Apt. #, etc.				uite, Apt. #, etc.				59-2456001	 -		ot Applicable Additional
22				27				5. Certificate of Status Desired			equired
City & State City & State								6. Election Campaign Financing		\$5.00	May Be
23				28				Trust Fund Contribution			to Fees
Zip		Country	<u></u>	Zip Cou			8. This corporation owes or has paid the current				
24	25 29 9. Name and Address of Current Registered Agent			red Ament	30	Personal Property Tax due June 30.				☐ No	
							1	O. Hallie allo Accides of New In	agiatered x	Saur	
	HUNT,R. MAR				81	Name			· · · · = · · · · · · · · · · · · · · ·		
1830 HYPOLUXO RD SUITE B						Street Address		(P.O. Box Number is Not Accepta	ble)		
LANTANA FL 33462					83	83					
					84	City				85 Zip	Code
								45 1	<u>FL</u>	<u> </u>	
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 roffice or registered agont, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as reagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									registered :		
SIGNAT	URE Signature, Ivue	d printed name of regi	stered agent and title it a	policable. (NO	TE: Registered Age	nt signature	required w	hen reinstatina)	DATE		
12.	· · · · · · · · · · · · · · · · · · ·					13.		ADDITIONS/CHANGES TO OFFI		DIRECTOR	1S IN 12
TITLE	PD	PD DELETE				1.1 TITLE				Change	Addition
NAME	110,117,10 11111111				1.2 NAME						
STREET ADO	STREET ADDRESS 4331 HUNTING TRAIL			1.3 STREET						11/11	
CITY-ST-Z					1.4 CITY-ST-ZIP				<u>:د</u>	1000	7.4
TITLE	VST	1 B				2.1 TITLE L.J CI			Unange	Addition	
NAME		HUNT, R. MARK				2.2 NAME					
	REET ADDRESS 4331 HUNTING TRAIL Y-ST-ZIP LAKE WORTH FL				1	2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP			.39	34/1	
CITY-ST-ZI	D DANE TO	UNIN FL		DELETE	3.1 TITLE	SF-ZIP				Change	Addition
NAME		R. MARK			3.2 NAME	ļ					
STREET ADD		JNTING TRAIL			3.3 STREET	ADDRESS					
CITY-ST-Z		ORTH FL			3.4. CITY - 5				3	3461	'
TITLE				☐ DELETE	4.1 TITLE					Change	Addition
NAME					4. 2 NAME						
STREET ADE	PRESS				4.3 STREET	ADDRESS					
CITY-ST-Z	Р				4.4 CITY - S	T-ZIP					
TITLE				DELETE	5.1 TITLE	1			[Change	☐ Addition
NAME	[5.2 NAME						
STREET ADD	1				5.3 STREET	ADDRESS					
CITY-ST-ZI	P			DELETE	5.4 CITY - S	T- ZIP		*****	r	Chanca	Addition
TITLE				DELETE	6.1 TITLE	-			L	Change	Addition
NAME CTOCCT ADD	.0.000				6.2 NAME	1000000					1
STREET ADD					6.3 STREET	- 1					

14. I 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 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 if changed, or on an attachment with an address.

2-22-98

FILED

Mar 27 1998 8:00am

Secretary of State