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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

1996 DOCUMENT #

1. Corporation Name

J17794

(5)

CONSULTANTS INTERNATIONAL, INC.

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Drincinal Place o											
i iliicipai i iace o	f Business		Mailing Address	3							
C/O MR. GAR			C/O MR. GAS								
	N BLVD. APT 1111		5100 N. OCE								
FT. LAUDERDALE FL 33308 FT. LAUDERDALE FL 33308 US US						3. Date Incorporated or Qualified 3a. Date of Last Report					
03			•					5/1986	04	/14/199	5
2. Principal Plac	e of Business		2a. Mailing Add	ress	0 - 1	20	4. FEI Num			A	pplied For
1 194		DRIVE	26 /94	40	BAY.	DRIVE	<u>e   66-</u>	0438257		N	ot Applicable
Suite, Apt. #,			Suite, Apt.	t, etc.			5 Certificat	e of Status Desired			Additional
2 <i>AP</i>	T. 20		27	PT-	20		<b>5.</b> Germoon			Fee R	equired
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Zip	Cou	ntry	Zip 22.	.1 /	Countr	y y		ooration has liability for		x under s	199.032,
4 331		<u> </u>	29 331	41	30		Florida S	nd Address of New	s No	l aant	
	9. Name and Ad	dress of Current	Registered Agent	<u> </u>		1 1	10. Name a	7		ABIL	
					81		Mr. We		Ler		
LOCKE, (	Gerard J				82	Street A	ddress (P.O. Box N	lumber is Not Accepta	ible)		
5100 N. (	OCEAN BLVD						1940	BAY DRI	ve		
APT 1111	ļ				83	3	APT. 2	pi			
FT. LAUD	ERDALE FL 3336	08			84	City		2 /		85 Zip	Code
_					-	],	MiaMi	Beach	FL.	3	3 <i>141</i>
11.) Pursuant to	the provisions of Se	ections 607.0502	and 607.1508, Flori	da Statute	es, the above	named cor	poration submits th	his statement for the pr	urpose of cha	inging its re	egistered offic
or registere	d agent, or both, in and accept the ob	the State of Florida Ilinationand, Sectio	a. Such change wa: on 607.0505, Florida	s autnorizi a Statutes	ea by the cor s.	poration's L	joard of directors. I	hereby accept the ap		#	agorii. ram
<b>.</b> .	Wall	e trile	•					3/	15/9	0	
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certify that the information indicated on this annual report or supplemental annual report is true and accurate and matching signature shall have the same legal effect as in 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 accuracy.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/14/96 80

804-721-189

Daytime Phone I

CR2E034 (1