FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 24 PM 12:44

DOCUMENT # K06150 (2)

1. Corporation Name
PERSONAL DEVELOPMENT CENTERS, INC.

Principal Place of Business	Mailing Address
20967 SOLANO WAY new address BOCA RATON FL 33433 below US	20967 SOLANO WAY new address BOCA RATON FL 33433 below US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 12/10/1987
3a. Date of Last Report: 01/28/1994

2. Principal Place of Business
21 19880 Stockholm Drive
Suite, Apt. #, etc.
22 B
City & State
23 Boca Raton, FL
Zip 24 33434 Country 25 Palm Beach

2a. Mailing Address
26 19880 Stockholm Drive
Suite, Apt. #, etc.
27
City & State
28 Boca Raton, FL
Zip 29 33434 Country 30 Palm Beach

4. FEI Number: 65-0028723 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent
WEISBAUM, GEOFFREY
20967 SOLANO WAY new address
BOCA RATON FL 33433

10. Name and Address of New Registered Agent
81 Name: Weisbaum, Geoffrey
82 Street Address (P.O. Box Number is Not Acceptable): 19880 Stockholm Drive
83
84 City: Boca Raton FL 85 Zip Code: 33434

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 registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE	P.D.	☑ Change ☐ Addition
NAME	WEISBAUM, GEOFFREY	1.2 NAME	Weisbaum, Geoffrey	
STREET ADDRESS	20967 SOLANO WAY new address	1.3 STREET ADDRESS	19880 Stockholm Drive	
CITY-ST-ZIP	BOCA RATON FL	1.4 CITY-ST-ZIP	Boca Raton, FL 33434	
TITLE	STM	2.1 TITLE	STM	☑ Change ☐ Addition
NAME	WEISBAUM, GAIL	2.2 NAME	Weisbaum, Gail	
STREET ADDRESS	20967 SOLANO WAY new address	2.3 STREET ADDRESS	19880 Stockholm Dr.	
CITY-ST-ZIP	BOCA RATON FL	2.4 CITY-ST-ZIP	Boca Raton, FL 33434	
TITLE		3.1 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4 CITY-ST-ZIP		
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: Gail Weisbaum Gail Weisbaum 1-14-95 (305) 344-5520
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0200057 CP