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

Mailing Address

19880 STOCKHOLM DRIVE

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

May 05, 1999 8:00 am Secretary of State

05-05-1999 90230 001 ***150.00

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999 **DOCUMENT # K06150**

1. Corporation Name

micipal Place of Business

STOCKHOM DRIVE

14. I hereby certify that the information supplindicated on this annual report or supplindicated on the annual report or supplindicated on the department of the perpendicular or director or

SIGNATURE:

PERSONAL DEVELOPMENT CENTERS, INC.

# RATON FL 33434	FL 33434 BOCA RATON FL 33434 US		DO NOT WRITE IN THIS SPACE		
:	00		Date Incorporated or Qualifed 12/10/1987		
≥ Principal Place of Busines	2a. Mailing Address		4. FEI Number	Applied	d For
1 9450 E.BLOAD	10,621 (AZE 44506. Bro)	AdvIEW Ar	65-0028723	Not Ap	plicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Addi Fee Requir	
City& State	City & State 28 Ban Mac by	k Fl	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Added to Fe	
Zip Country	Zíp 33154 30	Country	This corporation owes the current year In Personal Property Tax.	ntangibte □ Yes 🏖	ν̈́ο
9. Name and Address	of Current Registered Agent		10. Name and Address of New Registered	Agent	
WEISBAUM, GEOFFREY		81 Name A	ESS (P.O. Box Number is Not Acceptable)	7	
19880 STOCKHOLM DRIVE BOCA RATON FL 33434		83 9450	DE BROADVIEW VA	no	
	_				
		84 City	gy Harbor FI		54
office or registered agent or with in	ns 607.0502 and 607.1508, Florida Statutes, n the State of Florida. Such change was auth t the obligations of, Section 607.0505, Florida	orized by the corporate	oration submits this statement for the purpose on's board of directors. I hereby accept the appo	f changing its reg sintment as registe	istered ered
SIGNATURE	registered area and title if explicable. (NOTE, Re	m, fl&5l/m gistered Agent signature require	d when reinstating)	<u> </u>	— <u> </u>
	registered agent and title if applicable. (NOTE: Re FICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS	IN 12 Addition SOLUTION
IIILE PD	DELETE	1.1 TITLE	DESIGNAT.	Change [Addition
WEISBAUM, GEOFFR	EY	1.2 NAME	and walkership	•	7
19880 STOCKHOLM		1.3 STREET ADDRESS	EDBOUND SOUTH	رو	10.
ST-ZIP BOCA RATON FL	-···· -	1.4 CITY-\$T-ZIP	MAN PANCION FI 33NY	·	&
IIILE	☐ DELETE	,2.1 TITLE	77 / 74/87	Change [Addition
-		2.2 NAME			
STREET ADDRESS		2.3 STREET ADDRESS			
CITY ST-ZIP		2. 4 CITY-ST-ZIP	<u> </u>		
TILLE	☐ DELETE	3.1 TITLE		Change [Addition
		3.2 NAME			
STREET ADDRESS		3.3 STREET ADDRESS			
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HILE	☐ DELETE	4.1 TITLE		Change [Addition
		4. 2 NAME			
STREET ADDRESS		4.3 STREET ADDRESS			
CITY-ST-ZIP		4.4 CITY-ST-ZIP		[] At	- Addison
nite	☐ DELETE	5.1 TITLE		Change {	Addition
NAME		5.2 NAME			
STREET ADDRESS		5.3 STREET ADORESS			
CITY ST-ZIP	——————————————————————————————————————	5 4 CITY-ST-ZIP		Charac	Addition
TILE	☐ DELETE	6.1 TITLE		☐ Change	Addition
NAME		6.2 NAME			
STREET ADDRESS		6.3 STREET ADDRESS			ł

6.4 CITY-ST-ZIP

with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information of 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 ceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in tachment with an address, with all other like empowered.

305-8640711