

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

FILED

May 04 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # K31279 (8)
 1. Corporation Name
PROFESSIONAL FEE PLANNERS, INC.



Principal Place of Business 261 N.E. 201ST TERRACE SUITE 606 N. MIAMI BEACH FL 33179 US	Mailing Address 261 N.E. 201ST TERRACE SUITE 606 N. MIAMI BEACH FL 33179 US
--	--

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <u>261 N.E. 201 TERRACE</u> Suite, Apt. #, etc. 22 City & State 23 <u>N. MIAMI BEACH FL</u> Zip Country 24 <u>33179</u> 25 <u>DADE</u>		2a. Mailing Address 26 <u>261 N.E. 201 TERRACE</u> Suite, Apt. #, etc. 27 City & State 28 <u>N. MIAMI BEACH, FL</u> Zip Country 29 <u>33179</u> 30 <u>DADE</u>		3. Date Incorporated or Qualified <u>08/18/1988</u>
		4. FEI Number <u>NOT APPLICABLE</u>	Applied For <input type="checkbox"/> Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

9. Name and Address of Current Registered Agent MULTACK, JAMES A 450 NO. PARK RD, SUITE 606 HOLLYWOOD FL 33021	10. Name and Address of New Registered Agent 81 Name <u>MULTACK, JAMES A.</u> 82 Street Address (P.O. Box Number is Not Acceptable) <u>261 N.E. 201 TERRACE</u> 83 84 City <u>N. MIAMI BEACH</u> <u>FL</u> 85 Zip Code <u>33179</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 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 James A. Multack, President JAMES A. MULTACK 4-27-98
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP	D MULTACK, JAMES 261 N.E. 201ST TERRACE N. MIAMI BEACH FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	VICE PRESIDENT HARRIS, DAVID 10261 SW 124 ST MIAMI, FL 33176
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP		2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	

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.

SIGNATURE: James A. Multack, President JAMES A. MULTACK 4/27/98 305-254-1000

CR2E034 (10/97)