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Mar 20 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 # L04605 (6)

1. Corporation Name

THE ORLANDO MAC CONSULTING GROUP, INC.

Principal Place of Business

Mailing Address

226 WEBER ST.
ORLANDO FL 32803
US

P.O. BOX 677478
ORLANDO FL 32867
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21 516 PUERTA CT.

26 PO BOX 947947

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 ALTAMONTE SPRINGS, FL

28 MAITLAND, FL

Zip

Country

Zip

Country

24 32701

25

29 32744-7947

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GERHARD, ADLER
226 WEBER ST.
ORLANDO FL 32803

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

516 PUERTA CT.

83

84 City

ALTAMONTE SPRINGS

FL

85 Zip Code

32701

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

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 PST
NAME ADLER, GERHARD
STREET ADDRESS 9537 TRULOCK COURT
CITY-ST-ZIP ORLANDO FL

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS 516 PUERTA CT.
1.4 CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32701

TITLE D
NAME ADLER, GERHARD
STREET ADDRESS 9537 TRULOCK COURT
CITY-ST-ZIP ORLANDO FL

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS 516 PUERTA CT.
2.4 CITY-ST-ZIP ALTAMONTE SPRINGS FL 32701

TITLE V
NAME ADLER, GERHARD
STREET ADDRESS 9537 TRULOCK COURT
CITY-ST-ZIP ORLANDO FL

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS 516 PUERTA CT.
3.4 CITY-ST-ZIP ALTAMONTE SPRINGS FL 32701

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
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:

3/3/98

1676493285

CR2E034 (10/97)