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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L2594

(1)

DAVNE CONCULTING CHOLD IN

Principal Place of Business 1746 TANGLED VINE DRIVE WESLEY CHAPEL FL 33543 3. Date Incorporated or Qualified 10/25/1989 4. FEI Number Applied For Not	PATNE	consulting Groop, in	. .										
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Second Place of Business 2a. Mailing Address 5c. Mailing Add						3522							
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25		Country			Countr	<u>-</u> -		R	·····				
FAYNE, D. MARK 980 W. CYPRESS ROAD SUITE 101 PLANTATION FL 33317-9361 15. 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 agent. I am formation that, and the control of the purpose of changing its registered agent. I am formation this, and could name of approach. 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 agent. I am formation this, and could name of registered agent. I am formation this, and could name of registered agent. I am formation this, and could name of registered agent. I am formation this, and could name of registered agent. I am formation this purpose of changing its registered agent. I am formation this, and could name of registered agent. I am formation this purpose of changing its registered agent. I am formation this, and could name of registered agent. I am formation this purpose of changing its registered agent. I am formation this purpose of changing its registered agent. I am formation this purpose of changing its registered agent. I am formation this purpose of changing its registered agent. I am formation this purpose of changing its registered agent. I am formation this purpose of changing its registered agent. I am formation this purpose of changing its registered agent. I am formation this purpose of changing its registered agent. I am formation this purpose of changing its registered agent. I am formation this purpose of changing its registered agent. I am formation this purpose of changing its registered agent. I am formation this purpose of changing its registered agent. I am formation this purpose of changing its registered agent. I am formation this purpose of changing its registered agent. I am formation this purpose of changing its registered agent. I am formation this purpose of changing its registered agent. I am format	24				30]			Ftorida Statutes Yes No				
SUPPLY CONTROL OF THE		9. Name and Address of Curre	ent Registered Ag	ent				10.	Name and Address of New Re	gistered .	Agent		
SIGNATURE PD	FAY	NE. D. MARK			81	1	Name						
PLANTATION FL 33317-8981	698	W. CYPRESS ROAD					Street Addre	ess (P.O. Box Number is Not Acceptable)					
The provisions of Soctions 607 05:02 and 607 15:08, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the objective of collisions of the state of Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the objective of collisions of the state of Florida Statutes. Por the familiar with an accept the objective of collisions of the state of Florida Statutes. In the familiar with an accept the objective of the appointment as registered agent. I am familiar with, and accept the objective of the appointment as registered agent. I am familiar with, and accept the objective of the appointment as registered agent. I am familiar with, and accept the objective of the appointment as registered agent. I am familiar with, and accept the objective of the appointment as registered agent. I am familiar with an accept the objective of the appointment as registered agent. I am familiar with an accept the objective of the appointment as registered agent. I am familiar with an accept the objective of the appointment as registered agent. I am familiar with an accept the objective of the appointment as registered agent. I am familiar with an accept the objective of the appointment as registered agent. I am familiar with an accept the objective of the appointment as registered agent. I am familiar with an accept the objective of the appointment as registered agent. I am familiar with an accept the objective of the appointment as registered agent. I am familiar with an accept the objective of the appointment as registered agent. I am familiar with an accept the objective of the appointment as registered agent. I am familiar with an accept the objective of the appointment as registered agent. I am familiar with an accept the objective of the appointment as registered agent. I am familiar with an accept the objective of the appointment as regist					83	3			, , , , , , , , , , , , , , , , , , ,		······		
office or registrored 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 me flaminar with and accept the obligations of Socioline 607.0505, florida Statutes. Signature Signature					84	4	City	·		FI	85 Zip	Code	
Signaturo protect protect protect protect protect protect of protect protect of appraisable (NOTE) Signaturo protect prote	11. Pursuant office or reagent. La	to the provisions of Sections 607 05 egistered agent, or both, in the Stat m familiar with, and accept the oblig	502 and 607.1508, te of Florida Such gations of, Section	Florida Statut change was a 607.0505, Flo	es, the above authorized b orida Statute	ve-r by th	named corpo he corporatio	oratio on's b	on submits this statement for the pooard of directors. I hereby accept	urpose of the app	changing i	its registered s registered	
12.		Signature typed or reguled hadge of registered at	ocol and tibe d applicable	(NOT	F. Registered Ar	nent :	sionalure requires	o when	n peinstaling)	DATE			
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14. I do 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 or changed, or or an attacument with an address

SIGNATURE

GNATURE AND ENTED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTO

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Jan 22 1997 8:00am

Secretary of State