

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

FILED
Mar 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **L42148** (1)
1. Corporation Name
J.H.G. BUSINESS CONSULTING, INC.

Principal Place of Business 155 OCEAN BLVD GOLDEN BEACH FL 33160	Mailing Address 155 OCEAN BLVD GOLDEN BEACH FL 33160
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 01/09/1990	
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 65-0173336		Applied For <input type="checkbox"/> Not Applicable	
22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24. Country	29. Country	30. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent VEIS, HARRY C 100 NE 3RD AVE. STE. 850 FT. LAUDERDALE FL 33301		10. Name and Address of New Registered Agent	
		81. Name LESTER A. GRUDA	
		82. Street Address (P.O. Box Number Is Not Acceptable) 13899 BISCAYNE BLVD # 106	
		83. City MIAMI RLn.	
		84. State FL	
		85. Zip Code 33180	

11. Pursuant to the provisions of Sections 607.002 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 provisions of, Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]* **LESTER A. GRUDA** DATE **1/31/98**
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <input type="checkbox"/> DELETE	1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME D GREENSPAN, JOSEPH	1.2 NAME		
STREET ADDRESS 155 OCEAN BLVD	1.3 STREET ADDRESS		
CITY-ST-ZIP GOLDEN BEACH FL	1.4 CITY-ST-ZIP		
TITLE <input type="checkbox"/> DELETE	2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	2.2 NAME		
STREET ADDRESS	2.3 STREET ADDRESS		
CITY-ST-ZIP	2.4 CITY-ST-ZIP		
TITLE <input type="checkbox"/> DELETE	3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	3.2 NAME		
STREET ADDRESS	3.3 STREET ADDRESS		
CITY-ST-ZIP	3.4 CITY-ST-ZIP		
TITLE <input type="checkbox"/> DELETE	4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	4.2 NAME		
STREET ADDRESS	4.3 STREET ADDRESS		
CITY-ST-ZIP	4.4 CITY-ST-ZIP		
TITLE <input type="checkbox"/> DELETE	5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	5.2 NAME		
STREET ADDRESS	5.3 STREET ADDRESS		
CITY-ST-ZIP	5.4 CITY-ST-ZIP		
TITLE <input type="checkbox"/> DELETE	6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	6.2 NAME		
STREET ADDRESS	6.3 STREET ADDRESS		
CITY-ST-ZIP	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: *[Signature]* **JOSEPH GREENSPAN** DATE **3-12-98** DAYTIME PHONE # **3059369303**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CF2E034 (10/97)