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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #	180707
1 Comoration Name	

WYETT CONSULTING GROUP, INC.

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Principal Place	e of Business		Mailing Address							
C/O ALLEN SW			C/O ALLEN SWYE							
1145 N LAKE WAY PALM BCH, FL 33480			1145 N LAKE WAY PALM BCH. FL 33480				DO NOT WRITE IN THIS SPACE			
US	33400	US				3. Date Incorporated or Qualifed				
,				-			06/12/1990		ľ	
2. Principal Pl	lace of Busin	ess	2a, Mailing Addre	ess		· ·	4. FEI Number	Api	plied For	٠,
21 · · · · · · · · · · · · · · · · · · ·			<u> </u>	26			65-0216853	No	t Applicable	
Suite, Apt.	#. etc.		Suite, Apt. #,	etc.				\$8.75 A	Additional	٠.
22			27				5. Certificate of Status Desired	Fee Re	quired	
City & State	e		City & State				6. Election Campaign Financing	\$5.00	May Be	
23			28				Trust Fund Contribution	Added to	, ,	
Zip		Country	Zip	'Co	ountry		8. This corporation owes the current year	ar Intangible		
24		25	29	30			Personal Property Tax.	☐ Yes	No	
 .	9. Name	and Address of Currer	nt Registered Agent				10. Name and Address of New Registe	ered Agent		
					81	Name			1	
HAM	iby, Louis	L, II			82	Street Addre	ress (P.O. Box Number is Not Acceptable)			
321	ROYAL PO	INCIANA PLAZA			5	Olloot Addre	as (1.0. day (tallibo) to Not Not Stockers)			
PALN	W BCH. FL	33480			83					
					0.4	0.1	는 아이들 등 사람들이 기계하는 경우들은 기계를 보고 있다. 		Code * 1,3001	
					84	City			,008	
11. Pursuant office or re	to the provis egistered ag m familiar wi	ions of Sections 607.050 ent, or both, in the State th, and accept the obliga	2 and 607.1508, Florid of Florida. Such chang tions of, Section 607.0	la Statutes, the ge was authorize 1505, Florida Sta	above- ed by thatutes.	named corpo he corporation	ration submits this statement for the purpos n's board of directors. I hereby accept the a	se of changing its appointment as req	registered gistered	
SIGNATURE	•		e¥.							
010147.0112	Signature, typed	or printed name of registered age	nt and title if applicable.	(NOTE: Register	ed Agent	signature required	when reinstating) [DA1	TE		
										Ś
12.		OFFICERS AN	ND DIRECTORS	13	3.	1	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTO		9
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	WYETT, A	allen S.	ND DIRECTORS	13 ELETE 1.1 1.2	TITLE	·		S AND DIRECTO		(00/44/00)
TITLE	1 -	allen S.	ND DIRECTORS	13 ELETE 1.1 1.2	TITLE	·		S AND DIRECTO		(00/44)
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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, with all other like empowered.

6.4 CITY-ST-ZIP