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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Moriham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 13 PM 2:57

DOCUMENT # M64192 (1)

1. Corporation Name
RESULTS MANAGEMENT GROUP, INC.

Principal Place of Business Mailing Address
2101 CORPORATE BLVD., #106 BOCA RATON FL 33431

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **01/11/1988** 3a. Date of Last Report **01/27/1994**

2. Principal Place of Business 2a. Mailing Address
2101 Corporate Blvd **2101 Corporate Blvd.**

4. FEI Number **65-0035277** Applied For Not Applicable

Suite, Apt. #, etc. Suite, Apt. #, etc.
Suite 106 **Suite 106**

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

City & State City & State
Boca Raton, Fl. **Boca Raton, Fl.**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

Zip Country Zip Country
33431 **33431**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
MORRIS, JAN MICHAEL
2101 CORPORATE BOULEVARD #106
BOCA RATON FL 33431

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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 _____ DATE _____
Signature typed or printed name of registered agent and by whom applicable. (Date) Registered Agent signature required when registering.

12. OFFICERS AND DIRECTORS	
TITLE	PD
NAME	LEVINE, LARRY M.
STREET ADDRESS	2101 CORPORATE BLVD., #106
CITY - ST - ZIP	BOCA RATON FL 33431
TITLE	D
NAME	MORRIS, RON
STREET ADDRESS	2101 CORPORATE BLVD., #106
CITY - ST - ZIP	BOCA RATON FL 33431
TITLE	V
NAME	AMSTELL, JOEL
STREET ADDRESS	2101 CORPORATE BLVD., #106
CITY - ST - ZIP	BOCA RATON FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	P <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	JOEL AMSTELL
13 STREET ADDRESS	2101 Corporate Blvd., Suite 106
14 CITY - ST - ZIP	Boca Raton, FL 33431
21 TITLE	DS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	RON MORRIS
23 STREET ADDRESS	2101 Corporate Blvd., Suite 106
24 CITY - ST - ZIP	Boca Raton, FL 33431
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 an officer or trustee empowered to execute this report as required by Chapter 407, Florida Statutes, and that my name appears in Block 12 or Block 13, changed, or an attachment with an address.

SIGNATURE: *Joel Amstelle, Pres* **Joel Amstelle, Pres** 4/14/95 407-994-1090
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED AGENT OR DIRECTOR