FILE NOW: FILING FEE IS \$61.25

Mailing Address

NONPROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

FILED

Apr 17 1997 8:00am

Secretary of State

Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name N93000004933 (8)

NATIONAL BUDGET PLANNING, INC.

1000 E. ATLANTIC BLVD. SUITE 205	1000 E. ATLANTIC BLVD. Suite 205								
POMPANO BEACH FL 33060	POMPANO BEACH FL 33060-7447							of Last Report /17/1996	
2. Principal Piace of Business 2a. Mailing Address					4. FEI Number 65-0446562		· · ·	plied For	
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.			<u></u>		00 0440002			Applicable	
22 27			1		5. Certificate of Status Desired		70.70 A Fee Re	dditional guired	
City & State City & State				 	6. Election Campaign Financing		\$5.00	May Be	
23	28			· · · · · · · · · · · · · · · · · · ·	Trust Fund Contribution		Added to		
Zip Country	Z _i p		untry		8. This corporation has liability for in			199.032,	
24 25	29 Registered Agent	30]	γ-		Florida Statutes 10. Name and Address of New Rec	Yes 🔲 N			
9. Name and Address of Current Registered Agent SANDSTROM, JOSEPH S 1000 E. ATLANTIC BLVD. SUITE 205 POMPANO BEACH FL 33060			81	Name	TO. Name and Address of New He	IISTOLOG AU	7 1		
				. <u></u>					
			82						
			83						
							-1 2		
			64	City		FL I	15 Zip (code	
11. Pursuant to the provisions of Sections 617.0502	and 617.1508, Florida Statut	es, the a	bove	named corp	oration submits this statement for the p	urnose of ch	anging its	s registered	
office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligation	i Florida. Such change was a ons of, Section 617,0503, Flo	authorize orida Sta	ed by Itutes	the corporate	on's board of directors. I hereby accep	t the appoin	lment as	registered	
SIGNATURE									
Signature, typed or printed name of registered agent a			ed Ape	nt signature require	ed when reinstaling)	DATE			
			13.		ADDITIONS/CHANGES TO OFFIC				
		•	1.1 TITLE 1.2 NAME			I.	Change	Addition	
NAME SANDSTROM, JOSEPH S		•							
STREET ADDRESS 1000 E. ATLANTIC BLVD., #205	00100110 51 0000		1.3 STREET ADDRESS 1.4 City-St-Zip						
CITY-ST-ZIP POMPANU FL 33080	DELEYE	2.1 TITLE					Change	Addition	
, MAASHALL, RHUNDA		_	IAME		nario Ganci	_			
STREET ADDRESS 1000 E. ATLANTIC BLVD., #205			2.3 STREET ADDRESS		nario Ganci	FTIQ V	thC	. Blvd	
CITY-ST-ZIP POMPANO FL 33060				T-ZIP	Pompamo P	each	FC	33%C	
TITLE SD	☐ DELETE	3.1 TITLE					Change	Addition	
NAME SANDSTROM, LUCY	SANDSTROM, LUCY 33		3.2 NAME						
STREET ADDRESS 1000 E. ATLANTIC BLVD., #205			3.3 STREET ADDRESS						
			3.4. CITY - ST - ZIP						
TITLE			ITLE			L.,	Change	Addition	
NAME		4. 2 NAN							
STREET ADDRESS		- 1		ADDRESS					
CITY - ST - ZIP	☐ DELETE		CITY-S	T-ZIP		Τ-	Change	Addition	
TITLE			5.1 TITLE 5.2 NAME			h	- Amonths	L AUGINON	
NAME :				ADDRESS					
STREET ADDRESS				ADDRESS					
CHY-SI-7P	DELETE 6.1 T		CITY-S	1-71L		T	Change	Addition	
NAME			VAME	1			•	. =	
STREET ADDRESS				ADDRESS					
CITY-ST-ZIP			CITY-S	1					
14. I do hereby certify that the information supplied information indicated on this annual report or supplied.	tale alice different allegations and according					1.6	-416 At - 4	tha	
 Intermetion indicated on this applied report of \$100 	with this filing does not quali	ty for the	exe e	mption stated	in Section 119.07(3)(i), Florida Statute	s. I further ce	irtify that	ula varr. ** - +	