## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996
DOCUMENT #
1. Corporation Name

Principal Place of Business

P35622

(0)

THE CONSULTING GROUP LTD., INC.

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Mailing Address

APPROVED AND FILED

96 JAN 24 AM 8: 27

SECRETARY OF STATE TALLAHASSEE, FLORIDA



6888 ELM S' 300 MCLEAN VA US		PO BX 8057 MCLEAN VA 22106 US		Date Incorporated or Qualified	Report	
				09/23/1991 01/19/	1995	
2. Principal Piac 21	e of Business	2a. Mailing Address 26		4. FEI Number 54-1385644	Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt #, etc. 27		5. Certificate of Status Desired Section Secti		
C ty & State 23	<b>,</b>	City & State			.00 May Be ded to Fees	
Ζ(p)	Country 25	Ζφ <b>3</b>	Country 0	8. This corporation has liability for intangible tax under Florida Statutes Tyes No	s 199.032,	
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent		
			81 Name			
	ENNETH R.		82 Street	Address (P.O. Box Number is Not Acceptable)		
20100 BOCA WEST DR., STE. 151						
BOCA F	RATON FL 33433		83		•	
			84 City	FL B5	Zip Code	
11. Pursuant to	the provisions of Sections 607.0502	and 607.1508, Florida Statutes, t	the above-named or	orporation submits this statement for the purpose of changing it	s 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, Scotion 607.0505, Florida Statutes.						
SIGNATURE LAWY 4						
	isjn dan i types or printed na ne of registeran agent a		Registered Agent signature i			
12.	OF FIGERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIREC	<del></del>	
MILE	DCP	DELETE	1 1 TITLE	Chang	je 📑 Addition	
NAME	FOX, KENNETH R.		12 NAME	co an low arest		
STREET ADDRESS	2716 N. UPSHUR ST.		13 STREET ADDRESS	Ste 300, 6888 GLM Street		
CON - \$1 - ZiP TOLE	ARLINGTON VA	□ DELFTE	1.4 CITY - ST - ZIP	1 10 div.,	a Fill Addition	
NAME	st Fox, Kenneth R.	L) presse	2 1 TITLE 22 NAME	X Chang	je 🔲 Addition	
STREET ADDRESS	2716 N. UPSHUR ST.		2 3 STREET ADDRESS	Contra host in m Street		
CHY-ST ZIE	ARLINGTON VA		2.4 City - ST - ZiP	Ste So, 68ff Uzm Street Mc Fenn, VA 22101	;	
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0.1Y-S1.7P			3.4 CITY - \$1 - ZIP	****200.00 ***	<b>*200.00</b>	
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NAME			5.2 NAME			
STREET ADDRESS			53 STREET ADDRESS			
OTY-ST: 7P		[] DELETE	5 4 CITY-ST-ZIP	Chang	e Addition	
		□] bettere	6 1 TITLE 62 NAME	Chang	A NOTH NOTITION	
NAME STREET ADDRESS			63 STREET ADDRESS		0.5	
CITY - ST - ZIP			6 4 CITY - ST - ZIP		$\mathcal{H}\mathcal{W}$	
14. Ldo hereby	certify that the information supplied w	ith this filing is voluntarily furnishe	ed and does not que	L alify for the exemption stated in Section 119.07(3)(k), Florida Sta	itutes. I further	
certify that oath; that I	the information indicated on this annua	al report or supplemental annual ation or the receiver or trustee er	report is true and a mpowered to execu	ccurate and that my signature shall have the same legal effect a te this report as required by Chapter 607, Florida Statutes; and	s if made under	

SIGNATURE:

Kun 9

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/18/94

(703) 761-4150

Daytime Phone #

odine Phone #