## 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 #** P9200008454 (0)

BOYNTON BEACH CONSULTING, INC.							
Principal Plac	e of Business	Mailing Address			T TOURISTEN DIO TOUTO CARAN ORTER OUTIL	<b> </b>	<b>FFERFORNIO DI DI 1001</b>
36 WOODS LANE BOYNTON BEACH FL 33436-6204		36 WOODS LANE BOYNTON BEACH FL 33436-6204					
					3. Date Incorporated or Qualified 12/02/1992	3a. Date of La 02/27/	
	Mace of Business WINDWOOD DRIVE	2a. Mailing Address 26] /52 WINDV	Joog DR	1145	4, FEI Number 65-0376724		Applied For
Suite, Apt.		Suite, Apt. #, etc.	JOOD DIC	ive.	5. Certificate of Status Desired		Not Applicable  3.75 Additional Fee Required
6 V & Stat	BEARH CARDEUS A	Crtv & Sta0e	SAROPUS G	2	Election Campaign Financing     Trust Fund Contribution	\$	5.00 May Be
24 23	BEACH GARDENS, AC 341P 25 USA	20 77 33418	Country U.S. A	<del>)</del>	8. This corporation has liability for		<del></del>
J	9. Name and Address of Current		[30]	-	10. Name and Address of New F		t
			81 Name				
BRONSTEIN, IRVING 36 WOODS LANE BOYNTON BEACH FL 33436			82 Street	Addres	s (P.O. Box Number is Not Accental VIN) W 010 0 (R) VB	(ek	
BUYNIG	ON BEACH FL 33436			<del></del> -			
			84 PACE	m $B$	EACH CAPUENS	FL 85	334/12
or registe	to the provisions of Sections 607.0592 a wed agent, or both, in the State of Florida ath, and accept the obligations of, Sectic	<ul> <li>Such change was authorized</li> </ul>	, the above-named of 1 by the corporation's	orporat board	ion submits this statement for the pur of directors. I hereby accept the app	rpose of changing ointment as regist	Its registered office ered agent. I am
SIGNATURE	Ten a company of the			<u></u>		·	
12.	Separate typed or protect hair a of registered agent a OFFICERS AND	· · · · · · · · · · · · · · · · · · ·	Registered Agunt signature i	required w	ADDITIONS/CHANGES TO OFF	DATE	CTORS IN 12
TICLE	P	DELETE	1.1 TITLE	Τ	ADDITIONS/OFFANGES TO OFF	Cha	
NAME.	BRONSTEIN, IRVING		1.2 NAME				
STREET ACCRESS	36 WOODS LANE		1 3 STREET ADDRESS	15	Z WINDWOOD JR	100	
C+14+S+-712	BOYNTON BEACH FL 33436-6	204	1.4 CITY-ST-ZIP	Á	UM & MALL GARAG	15 215	22418
TILF		☐ DÉLÉTE	2 1 TITLE	1 17	Z WINDWOOD DR LM BOACH GARDE	Cha	nge 🗆 Addition
NAM:			2.2 NAME				
STREET ADDRESS			2.3 STREET ADDRESS				
City-St-ZP			24 CHY-ST-ZIP				
THE		☐ DELETE	3 1 THILE	1	·	Cha	nge
NAM*		. <del>-</del>	3.2 NAME			-	- <del>-</del>
STREET ADDRESS			33 STREET ADDRESS	1			
0ffY ST-ZiP			34 CITY-ST-ZIP				
THEF		☐ DELETE	4. 1 TITLE	1		☐ Cha	nge 🔲 Addition
MME			4 2 NAME	1			
STREET ADDRESS			4 3 STREFT ADDRESS				
CHY ST ZIP			4.4 CITY-ST-ZIP				
Tille		DELFTE	5 1 TITLE	[		☐ Cha	nge 🔲 Addition
NAME			5.2 NAME				
STREET ADDRESS			5 3 STREET ADDRESS				
CITY ST ZIF			5 4 CITY-ST-ZIP				
TIFLE		DELETE	6 1 TITLE	1		☐ Cha	nge 🔲 Addition
NAME			6.2 NAME				

6.3 STREET ADDRESS

6 4 CITY - ST - ZIP 14. To 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 this 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 chapted, or on an appears with an address.

SIGNATURE: V

STEEL LADORESS

CH1+51-2IP

landos SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #