FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 FEB 27 AM 12:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P92000008904 (4)**

1. Corporation Name
CORPORATE SEARCH CONSULTANTS, INC.

Principal Place of Business	Mailing Address
6900 SILVER STAR ROAD SUITE 204 ORLANDO FL 32809	6900 SILVER STAR ROAD SUITE 204 ORLANDO FL 32809

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/30/1992
3a. Date of Last Report: 02/08/1994

2. Principal Place of Business	2a. Mailing Address
21 775 KIRKMAN ROAD	26 775 KIRKMAN ROAD
Suite, Apt. #, etc. 22 SUITE 105	Suite, Apt. #, etc. 27 SUITE 105
City & State 23 ORLANDO FL	City & State 28 ORLANDO FL
Zip 24 32811 Country 25	Zip 29 32811 Country 30

4. FEI Number: 59-3150463 ☐ Applied For ☐ Not Applicable

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

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

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

9. Name and Address of Current Registered Agent

CIARAMITARO, ANTHONY
6900 SILVER STAR ROAD
SUITE 204
ORLANDO FL 32812

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 _____
Signature, typed or printed name of registered agent and date of signature — NOTE: Registered Agent's signature required when reinstating

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☐ Change ☐ Addition
NAME	CIARAMITARO, ANTHONY T	12 NAME	
STREET ADDRESS	2807 SILVER RIDGE DR.	13 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32818	14 CITY-ST-ZIP	
TITLE	D	21 TITLE	D ☒ Change ☐ Addition
NAME	CIARAMITARO, PAUL	22 NAME	CIARAMITARO, PAUL
STREET ADDRESS	2437 LAKE VISTA CT., #305	23 STREET ADDRESS	2614 GILSON CT.
CITY-ST-ZIP	CASSELBERRY FL	24 CITY-ST-ZIP	ORLANDO, FL 32835
TITLE	D	31 TITLE	D ☒ Change ☐ Addition
NAME	CIARAMITARO, JOSEPH J.	32 NAME	CIARAMITARO, JOSEPH J
STREET ADDRESS	2807 SILVER RIDGE	33 STREET ADDRESS	1497 S Kirkman Rd. # 1104
CITY-ST-ZIP	ORLANDO FL	34 CITY-ST-ZIP	Orlando, FL 32811
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		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)(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.

SIGNATURE: [signature] ANTHONY CIARAMITARO 2/20/1995
SIGNATURE AND TYPED OR PRINTED NAME OF BINDING OFFICER OR DIRECTOR — Date
407 578 3388

0080723 CP