FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

	1998 DIVISION OF CORPORAT			ATIO	SNC		
DOCUMENT # P9200013783 (5) SHARPTON, BRUNSON CONSULTING, INC.							
Principal Place of Business Mailing Address							
ONE SE THIS			ONE SE THIRD AVE				
SUITE 2100		SUIT	SUITE 2100				
MIAMI FL 331	131	MIAL	MIAMI FL 33131				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
							12/23/1992
2. Principal P	Place of Business	2a. M	2a. Mailing Address				4. FEI Number Applied For
21		26	26				65-0382903 Not Applicable
Sulte, Apt.	#, etc.	├	Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Regulred
City & Stat	6		ity & State				6. Election Campaign Financing \$5.00 May Be
23		28	•				Trust Fund Contribution Added to Fees
Zip	Country	Zi	р	Col	ıntry		8. This corporation owes or has paid the current year Intangible
24	25	29		30			Personal Property Tax due June 30. Yes No
011	9. Name and Address of Curr	ent Hegister	ed Agent		81	Name	10. Name and Address of New Registered Agent
SHARPTON, DARRYL K							
ONE SE THIRD AVE SUITE 2100					82	Street A	t Address (P.O. Box Number is Not Acceptable)
MIAMI FL 33131					83		
,,,,,	() 00.01				84	City	■ 85 Zip Code
	_				04	City	Fi_ es zip code
11. Pursuant office or r	to the provisions of Sections 607.09	502 and 607.	1508, Florida Statu Such change was	tes, the a	bove d by	-named	d corporation submits this statement for the purpose of changing its registered reporation's board of directors. I hereby accept the appointment as registered
agent. I a	m familiar with, and accept the obl	igations of, S	ection 607.0505, F	lorida Sta	tutes	3.	sportation of board of directors. Thoropy accept the appointment as registered
SIGNATURE	Signature, typod or printed name of registered a	cont and title il an	nicable (8:0)	TE: Basistara	d Ago	nt cinneture	re required when reinstating) DATE
12.		ND DIRECTO		13.	u Aye	in algricione	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD		DELETE	1.1 1	TLE	T	Change Addition
NAME	SHARPTON, DARRYL K			1.2 N	AME	ĺ	
STREET ADDRESS	ONE SE THIRD AVE SUIT	E 2100		1.3 S	TREET	ADDRESS	
CITY-ST-ZIP	MIAMI FL 33131			1.4 0	TY-S	T-ZIP	
TITLE	VSTD		☐ DELETE	2.1 TI	TLE	J	Change Addition
NAME	BRUNSON, ANTHONY			2.2 N		}	
STREET ADDRESS	ONE SE THIRD AVE SUITI	E 2100				ADDRESS	
CITY-ST-ZIP	MIAMI FL 33131		DELETE			ST-ZIP	Change Addition
TITLE NAME			L DELETE	3.1 TO 3.2 N/			Change (Abbillon)
STREET ADDRESS						ADDRESS	
CITY-ST-ZIP						T-ZIP	
TITLE			DELETE	4.1 10		AT-ZIF	Change Addition
NAME				4. 2 N		ĺ	
STREET ADDRESS						address	
CITY-ST-ZIP				4.4 CI		ſ	
TITLE			DELETE	5.1 TI			Change Addition
NAME				5.2 N/	AME	1	1
STREET ADDRESS				5.3 \$1	REET	ADDRESS	
CITY-ST-ZIP			T DECETE	5.4 CI	TY-\$	T-ZIP	Channe Daddin

14. Thereby certify that the information supplied with this filing 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 received 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 received 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 received 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 received 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 received 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 received shall be a 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 received shall be a 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 received shall be a same legal effect as if made under oath; that I am an officer or director of the corporation of the co

6.2 NAME

NAME

STREET ADDRESS CITY-ST-ZIP

FILED

Feb 25 1998 8:00am

Secretary of State