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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1	1996 DIVISION OF CORPORATIONS					
DOCUN 1. Corporation	MENT # P9300	0007967 (1)			
DICK N	ACGILL INTERNATIONAL B	USINESS CONSULTA	NTS,			
INC.		•				
Principal Place	of Business	Mailing Address			T EE BRAND IN THINK IN HER THE BRAND ON I	COLFI BOTTH GOTAL INDIA TOLIN DILLE TOUR THAT
155 OCEAN I	LANE DR	155 OCEAN LANE DR				
UNIT 813 KEY BISCAYNE FL 33149		UNIT 813 KEY BISCAYNE FL 33149				
RET DISCATE	NE FE 00140			Date Incorporated or Qualified 02/01/1993	3a. Date of Last Report 05/01/1995	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number 65-0385612	Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			Not Applicable \$8.75 Additional	
22	, 010.	27		5. Certificate of Status Desired	Fee Required	
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zφ	Country	7in Country 29 30		,	8. This corporation has liability for	
24	25 g. Name and Address of Curren				Florida Statutes X Yes No 10. Name and Address of New Registered Agent	
	g. Name and Address of Corren	t negistered Agent	81	Name	IV. Haine and Address of flex	iogistoros Agent
SALA R	ROSEMARY A		82	Ctroot Add	ress (P.O. Box Number is Not Acceptat	ole)
	ANDON BLVD #302		82 8		Tess II .c. Doc 1000 in the company	
KEY BIS	SCAYNE FL 33149	83				
			84 City			FL 85 Zip Code
or registere familiar wit SIGNATURE	ed agent, or both, in the State of Floric h, and accept the obligations of, Sections Sphakes tyled or mile there of experient agent	da. Such change was authoriz on 607.0505, Florida Statutes	ed by the con	igration's boa	ration submits this statement for the purify of directors. Thereby accept the appropriate restating	pointment as registered agent. I am
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OF	FIGERS AND DIRECTORS IN 12 Change Addition
TITLE	D DOOR DICHARD F	☐ DELETE	1 1 HELE 1.2 NAME			Li charige Li Addition
NAME STREET ADDRESS	MCGILL, RICHARD F 155 OCEAN LANE DR #813			L ADORESS		
C-TY-ST-Z-P	KEY BISCAYNE FL 33149		1.4 CHY+S1+7IF			
TITLE	D	[] DELETE	2 1 7:1(E			Change
NAME	MCGILL, LILIANE J		2.2 NAME			
STREET ADDRESS	155 OCEAN LANE DR #813		2.3 STREET ADDRESS			
CITY - ST - ZIP	KEY BISCAYNE FL 33149	DELETE	24 CITY - 3 1 THLF	ST - Zi?		Change Addition
NAME			3 2 NAME			<u> </u>
STREET ADDRESS			3.3 STEEL	1 ADDRESS		
CITY-S1-ZIF			3.4 CITY -	SI - ZIP		
TITLE		☐ DELETE	4 1 TILLE			Change Addition
NAME			4.2 NAME			
STREET ADDRESS				LADDRESS		
CITY+ST-7IP		DELETE	5 1 TP LF			Change Addition
TITLE NAME			5.2 NAME			
STREET ADDRESS			1	TACORESS		
CITY-S1-ZIP			5.4 CITY			
TITLE		DELETE	6 1 TITLE			Change Addition
NAMÉ			6.2 NAME			

640-17 \$1-78° promation 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 logical or 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 legal of the proporation or the proceder or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name 13 or change if or on an attachment/with all address.

MCG-CC

Authorized by Varieties of Name of Signific Orphae on Director

Director

**Direct 14. I do hereby certify that the information indo oath; that I am an officer or d appears in Block 12 or Block

6.3 STREET ADDRESS

64 CHY ST-7IP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

CR2E034 (12/95)