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 MAY -1 PM 2:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000008612 (2)

1. Corporate Name
SUNCOAST CONSULTING SERVICES, INC.

Principal Place of Business:
8026 BRIGHTON DRIVE
PORT RICHEY FL 34668

Mailing Address:
8026 BRIGHTON DRIVE
PORT RICHEY FL 34668

(FOR OFFICE USE ONLY)

3. Date Incorporated / Qualified: 01/29/1993
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business
21 312 N. FLA AVE
Suite, Apt. # or Bldg.
22 376
City & State
23 TARPON SPRINGS FL.
24 34689 25

2a. Mailing Address
26 SAME
Suite, Apt. # or Bldg.
27
City & State
28
29 30

4. FEI Number: 59-3178019 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Electronic Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. Is Corporation Subject to Chapter 607 of Florida Statutes? ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
MOSES, WILLIAM L
312 N FL AVE
#376
TARPON SPRINGS FL 34689

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 Section 607.0505, 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. The 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]
Signature of Registered Agent or Officer or Director of Registered Agent Corporation — Date

12. OFFICERS AND DIRECTORS

TITLE	VSD
NAME	MOSES, WILLIAM L
STREET ADDRESS	8026 BRIGHTON DR.
CITY, ST, ZIP	PORT RICHEY FL 34668
TITLE	PTD
NAME	MOSES, SYLVIA S
STREET ADDRESS	8026 BRIGHTON DR.
CITY, ST, ZIP	PORT RICHEY FL 34668

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS (Attach)

TITLE	VTS ☒ Change ☐ Addition
NAME	
STREET ADDRESS	312 N FLA. AVE #376
CITY, ST, ZIP	TARPON SPRINGS, FL. 34689
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	312 N. FLA. AVE #376
CITY, ST, ZIP	TARPON SPRINGS, FL. 34689

14. I hereby certify that the information supplied with this report is true and complete, and that the proper filing fee has been or will be paid. I further certify that I am a duly authorized officer or director of the corporation or the agent of the corporation for the purpose of signing this report. I understand that the signature below constitutes an affirmation under the penalties provided for in Section 817.155, Florida Statutes, that I have read the foregoing statements and that to the best of my knowledge and belief they are true and correct.

SIGNATURE: [signature] 4/27/95 813 937-5086
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0305120 CP