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 AM 5:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000023663 (6)**

1. Corporate Name
ACCURATE SALES CONSULTANTS, INC.

Principal Place of Business
413 S.E. 4TH ST.
DANIA FL 33004

Mailing Address
413 S.E. 4TH ST.
DANIA FL 33004

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **03/30/1993**
3a. Date of Last Report: **07/28/1994**

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
24 25

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

4. FEI Number: **65-0398344**
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. Is your business a minority business as defined by Florida Statutes? ✓ Yes ☐ No

9. Name and Address of Current Registered Agent
STRALEY, STEPHEN J
505 N.E. 125 ST.
NORTH MIAMI FL 33161

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. I hereby accept the appointment as registered agent of the above corporation. I am familiar with and accept the duties and responsibilities of registered agent.

SIGNATURE

12. OFFICERS AND DIRECTORS
TITLE D
NAME ANZALONE, NANCY
STREET ADDRESS 413 S.E. 4TH ST.
CITY, ST, ZIP DANIA FL 33004

13. ADDITIONAL OFFICERS AND DIRECTORS
TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
☐ Change ☐ Add/Del

14. I hereby certify that the information indicated on this report or supplemental annual report is true and accurate and that my signature shall constitute my affirmation under oath that I am an officer or director of the corporation or the receiver or trustee empowered to execute the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 above with an address.

SIGNATURE: Nancy Anzalone PRES 5-1-95 305-932-7331
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
NANCY ANZALONE PRES

0076344 CP