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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## 1997

## FILED Apr 08 1997 8:00am Secretary of State

DOCUMENT # P93000040462 (2) INTERCONSULT (USA), INC.							
Principal Place of Business 19369 OCEAN GRANDE CT BOCA RATON FL 33498 US		Mailing Address 19369 OCEAN GRANDE CT BOCA RATON FL 33498-4850 US			: QBIII KIDII DDIII B1818 <del>5</del> 7	1 <b>18 1181 188</b> 1	
					<ol> <li>Date Incorporated or Qualified 06/08/1993</li> </ol>	3a. Date of Last 6 04/23/1996	Report
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	<del></del>	pplied For
21		26			65-0419500	<del></del>	lot Applicable
Suite, Apt	#. etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	4 +	Additional
City & State	е	City & State			6. Election Campaign Financing		lequired
23		28			Trust Fund Contribution		May Be to Fees
Zφ	Country Zip		Count	Country 8. This corporation has liability for intangible		ntangible tax under	s. 199.032,
24	25 29 30 9. Name and Address of Current Registered Agent			Florida Statutes Yes No			
		Hegistered Agent	-   8	1 Name	10. Name and Address of New Reg	distered Agent	
	LASZ, ANDREW						
19369 OCEAN GRANDE CT BOCA RATON FL 33498			8	2 Street Add	fress (P.O. Box Number is Not Acceptab	le)	
	0// 1911 0/11 1 2 00 100		8	3			
			8	4 City		FL 85 Zip	Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statul	es, the abo	ve-named cor	poration submits this statement for the p	urpose of changing	its registered
office or r agent. La	registered agent, or both, in the State ( am familiar with, and accept the obliga	of Florida. Such change was tions of, Section 607,0505, Fl	authorized orida Statut	by the corpora les.	ation's board of directors. I hereby accept	t the appointment as	s registered
SIGNATURE	M						
12.	Signature, typed or ported name of registered agen OFFICERS AND		13.	Oeu adusture tedu	ired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIRECTO	RS IN 12
TITLE	P	DELETE	1.1 TITLE			Change	Addition
NAME	HALASZ, ANDREW		1.2 NAM	E			2
STREET ADDRESS	19369 OCEAN GRANDE CT		1.3 STRE	ET ADORESS			ָבָּ בָּב
CITY - ST ZIP	BOCA RATON FL	DELETE		-ST-ZIP		Change	Addition
TITLE NAME	V HALASZ, ANDREW	€ DECEIE	2.1 TITLE 2.2 NAM			Criange	LJ Addition
STREET ADDRESS	19389 OCEAN GRANDE CT		4	ET ADDRESS			
City-St-Zip	BOCA RATON FL.			r-ST-ZiP			
TITLE	8	DELETE	3.1 TOU			☐ Change	Addition
NAME	HALASZ, ANDREW		3.2 NAM	E			
STREET ADDRESS	19369 OCEAN GRANDE CT		3.3 STRE	ET ADDRESS			-
CHY-S1-ZIP	BOCA RATON FL	Print		(-ST-ZIP		Change	Addition
hill f		DELETE	4.1 TITLS 4.2 NAM			☐ Change	Addition
NAME STREET ADORESS				ET ADDRESS			
CHY-ST-ZIP				-ST-ZIP		1	-
TITLE		DELETE	5.1 Titul			Change	Addition
NAME			5.2 NAM	ie			
STREET ADDRESS			5.3 STRE	ET ADDRESS			
CHY-ST-ZIP		\		-ST-ZIP			F = 1 + 3 · 3 · 3 · 3
TITLE		DELETE	6.1 TITLE			☐ Change	Addition
NAME			6.2 NAM	ſ			1
STREET ADDRESS				ET ADDRESS			
011Y-SI-ZIP 14.   do here!	t by certify that the information supplied	with this filing does not qual		-ST-ZIP xemption state	ed in Section 119.07(3)(i), Florida Statutes	s. I further certify tha	t the

4. I do hereby 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 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 12 or Block 12 or on an attachment with an address.

SIGNATURE:

WHE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Apr. 2.

1997

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