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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000040719 (5)

A & M EXECUTIVE SEARCH, INC.

FILED Apr 30 1997 8:00am Secretary of State



Principal Place of Business 14135 SNEAD CIR ORLANDO FL 32637		Mailing Address	Mailing Address			1 HORATADAN AND ANAMA ANAMA MANAMA PARAMA ANAMA			
		14135 \$NEAD CIR ORLANDO FL 82837-7032							
				-	3. Date Incorporated or Qualified 06/08/1993	3a. Date 05/29	of Last F	eport	
2. Poncipal F	Place of Business	2a. Mailing Address			4. FEI Number			oplied For	
21		26			59-3187800			ot Applicable	
S⊌te, Apt ──⊤	t #, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional equired	
22 City & Sta		City & State		·····	& Floation Communica Financia				
23	140.	28			Election Campaign Financing Trust Fund Contribution	\Box		May Be to Fees	
20 ј	Country	Zip	Count	ry	8. This corporation has liability for	ntanoible ta			
24	25	29	30			Yes 🗌			
	9. Name and Address of Cu	rrent Registered Agent			10. Name and Address of New Re	glatered Ag	ent		
AXE	elrod, Joseph I		6	1 Nan	e				
14135 SNEAD CIR Orlando Fl. 32837			[6	82 Street Address (P.O. Box Number is Not Acceptable)					
O/W			8	3					
			ء ا	4 City			85 Zip	Code	
			ľ	- City		FL	ου <i>ε</i> ιρ		
SIGNATURE	Signatine, typed or printed name of registere	d agent and tele if applicable (NC AND DIRECTORS	OTE. Registered A	gent signe	ure required when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE	NDECTO		
12. Title	D	DELETE	11 1171		ADDITIONS/CHANGES TO OFFICE		Change	Addition	
NAME	MCCARTHY-AXELROD, MIL	—	1.2 NAM						
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NAME	AXELROD, JOSEPH I		2.2 NAM	E					
STREET ADDRESS	***************************************		2.3 STR	ET ADDRES	S	21			
CITY - S1 - ZIF	ORLANDO FL 32837	T POLETE		1-51-ZIP			1 0	1 1.1.00	
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STREET ADORESS CITY-ST-ZIP TITLE		☐ DELETE	5.2 NAV 5.3 STR 5.4 CITY 6.1 TITU	ET ADDRE	5	L	Change	Addition	
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STEEFT ADORESS CITY-ST-ZIP TITLE			5.2 NAM 5.3 STRI 5.4 CITY 6.1 TITL 6.2 NAM 6.3 STRI	ET ADDRE		L] Change	Addition	

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 they eceiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name