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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996 DOCUMENT #

Corporation Name

P93000064124 (9)

| 286 | CONSULTING. | & SALES | INC. |
|-----|-------------|---------|------|

Principal Place of Business Mailing Address 8680 NW 24 ST 8680 NW 24 ST SUNRISE FL 33322 SUNRISE FL 33322 3. Date Incorporated or Qualified 3a. Date of Last Report 09/09/1993 03/17/1995 2. Principa' Place of Business 4. FEI Number 2a. Mailing Address Applied For 65-0432280 21 26 Not Applicable Suite. Apt. #. etc Suite, Act. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No Country 24 25 30 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name TITUS, CRAIG **B2** Street Address (P.O. Box Number is Not Acceptable) 8680 NW 24 ST R3 SUNRISE FL 33322 64 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such 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, typied or printed name of regelered agent and offe if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE ☐ Change ☐ Addition TIELE 1 1 THILE TITUS, SUSAN 1.2 NAME CR2E034 NAME 8680 NW 24 ST STREET ADDRESS 13 STREET ADDRESS SUNRISE FL 33322 CHY-S1-ZIP 14 CHTY - \$1 - ZIP DELETE Change ☐ Adddion TILLE 2 1 TITLE TITUS, CRAIG NAME 2.2 NAME 8680 NW 24 ST STREET LADORESS 23 STREET ADDRESS SUNRISE FL 33322 CITY ST ZIE 24 CITY - ST - ZIP DELETE THEF 3 1 TITLE ☐ Change Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3 4 CHTY - ST - ZIP CITY - ST-ZIF DELFTE 4 1 THILE Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CHTY-ST-ZIP 44 CITY-ST-ZIP ☐ DELETE Change | ☐ Addition THE 5 1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - S1 - ZIP 54 CITY - ST - ZIP DELETE TITLE 6.1 THLE Change Addition NAME 62 NAME City St 2ii

14. It do hereby certify that the information supplied with this filing is voluntarily furnished and decretify that the information indicated on this annual report or supplemental annual report is the arid ecc. If any signature shall have the same legal effect as if made under eath; 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 13 if changed, or on an attachment with an address. STREET ADDRESS **6.3 STREET ADDRESS**

SIGNATURE: (

President

(12/95)