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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

May 13 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

14. Thereby certify that the inform indicated on this annual reporting officer or director of the corporation of the corporatio

P93000087296 (8)

CHL MARKETING CONSULTANTS, INC.

1					
Principal Place of Business Mailing Address					
12373 NW 10TH DRIVE CORAL SPRINGS FL 33071 US		12373 NW 10TH DRIVE CORAL SPRINGS FL 33071 US		DO NOT WRITE IN THIS SPACE	
<u> </u>				3. Date Incorporated or Qualified 01/03/1994	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number Applied For	
21		26		65-0456845 Not Applicable	
Sulte, Apt. #, etc		Suite, Apt #, etc.		5. Certificate of Status Desired See Required Fee Required	
City & State		City & State		Election Campaign Financing Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible	
24	25	29	30	Personal Property Tax due June 30. X Yes No	
	9, Name and Address of Current	it Registered Agent		10. Name and Address of New Registered Agent	
	EVIN, ALAN		81 Na	Name	
12373 NW 10TH DRIVE CORAL SPRINGS FL 33071			82 Str	Street Address (P.O. Box Number is Not Acceptable)	
			83		
			84 Cit	City 85 Zip Code	
14 2		- 100% 4/ 00 Ft3d- Ct-		F <u>L</u> '	
l office or r	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 office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Phereby accept the appointment as registered				
1	m familiar with, and accept the obliga	alions of, Section 607,0505,	Florida Statutes.		
SIGNATURE	Signature, typed or protect name of registerest age	ercand the dapplication (1	NOTE: Registered Agent sig	iguature resulted when reinstating) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DST	DELETE	1.1 TITLE	Change Addition	
NAME	LEVIN, SHERRY A		1.2 NAME		
STREET ADDRESS	12373 NW 10TH DRIVE		1.3 STREET ADDR		
CITY-ST-ZIP	CORAL SPRINGS FL	☐ DELETE	1.4 CITY - ST - ZIP		
NAME	LEVIN, ALAN A	T DECEUE	2.1 TITLE 2.2 NAME	Change Addition	
STREET ADDRESS	12373 NW 10TH DRIVE		2.2 NAME 2.3 STREET ADDR	nDree	
CITY-ST-ZIP	CORAL SPRINGS FL		2.3 STREET ADDR	· · · · · · · · · · · · · · · · · · ·	
TITLE		□ DÉ LETE	31 TITLE	Change Addition	
NAME			3.2 NAME		
STREET ADORESS			3.3 STREET ADDR	PRESS	
CITY-ST-ZIP			3.4. CITY - ST - 7(P		
TALE		L DELETE	4.1 TITLE	Change Addition	
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDR		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE	P Change Addition	
NAME		LJ VILLE	5.2 NAME		
STREET ADDRESS			5 3 STREET ADDR	22480	
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	61 TITLE	Change Addition	
NAME			6 2 NAME		
STREET ADDRESS			63 STREET ADDR	DRESS	

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 application of the report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an for the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in