

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P94000009184 (0)**

1. Corporation Name

FORESIGHT RESEARCH, INC.



Principal Place of Business

Mailing Address

**1467 NE 36TH STREET
SUITE 37
OAKLAND PARK FL 33334
US**

**3032 E. COMMERCIAL BLVD.
SUITE 37
FT. LAUDERDALE FL 33308**

3. Date Incorporated or Qualified

01/27/1994

3a. Date of Last Report

08/11/1995

4. FEI Number

65-0543402

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

State, Apt. #, etc.

State, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**PETITJEAN, DIANNE
1467 NE 36TH STREET
SUITE 303A
FORT LAUDERDALE FL 33308**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

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 officer or 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 607.0605, Florida Statutes.

SIGNATURE

Signature of individual or firm designated to file this report

Signature of Registered Agent (Signature required when changing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

☐ DELETE

1.1 TITLE

☐ Change

☐ Addition

NAME

PETITJEAN, DIANNE

1.2 NAME

STREET ADDRESS

1467 NE 36TH STREET

1.3 STREET ADDRESS

CITY-STATE-ZIP

OAKLAND PARK FL

1.4 CITY-STATE-ZIP

TITLE

PRES

☐ DELETE

2.1 TITLE

☐ Change

☐ Addition

NAME

OWEN, DAVID

2.2 NAME

STREET ADDRESS

2411 RIVERA DRIVE

2.3 STREET ADDRESS

CITY-STATE-ZIP

MIRAMAR FL

2.4 CITY-STATE-ZIP

TITLE

SECT

☐ DELETE

3.1 TITLE

☐ Change

☐ Addition

NAME

PETITJEAN, DIANNE

3.2 NAME

STREET ADDRESS

1467 NE 36TH STREET

3.3 STREET ADDRESS

CITY-STATE-ZIP

OAKLAND PARK FL

3.4 CITY-STATE-ZIP

TITLE

☐ DELETE

4.1 TITLE

☐ Change

☐ Addition

NAME

☐ DELETE

4.2 NAME

STREET ADDRESS

☐ DELETE

4.3 STREET ADDRESS

CITY-STATE-ZIP

☐ DELETE

4.4 CITY-STATE-ZIP

TITLE

☐ DELETE

5.1 TITLE

☐ Change

☐ Addition

NAME

☐ DELETE

5.2 NAME

STREET ADDRESS

☐ DELETE

5.3 STREET ADDRESS

CITY-STATE-ZIP

☐ DELETE

5.4 CITY-STATE-ZIP

TITLE

☐ DELETE

6.1 TITLE

☐ Change

☐ Addition

NAME

☐ DELETE

6.2 NAME

STREET ADDRESS

☐ DELETE

6.3 STREET ADDRESS

CITY-STATE-ZIP

☐ DELETE

6.4 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 13 if changed, or on an attachment with an address.

SIGNATURE:

Dianne Petitjean
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dianne Petitjean

1/26/96

568-2311

CR2E034 (12/95)