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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000013564 (7)

CARPE DIEM CONSULTANTS, INC.

1171 COATES LANE 1171 COATES LANE CUDJOE KEY FL 33042 **CUDJOE KEY FL 33042-4321** 3a. Date of Last Report 3. Date Incorporated or Qualified 02/18/1994 03/19/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0467573 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Zip Country Zin 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name 81 VURAL, EROL M ESQ. 2ND FLOOR BARNETT BANK BLDG. Street Address (P.O. Box Number is Not Acceptable) MM 25, U.S. HWY ONE 83 SUMMERLAND KEY FL 33042 84 Zip Code 11. Pursuant to the previsions 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. I hereby accept the appointment as registered agent 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or profed harne of registered agent and to entapplicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DΡ THILE ☐ DELETE 1.1 TITLE ☐ Change **X** Addition NAME STIEFBOLD, RODNEY P 1.2 NAME 1171 COATES LANE STREET ADDRESS 1.3 STREET ADORESS **CUDJOE KEY FL** 1.4 CITY - ST - ZIP (UD30 E KEY! FL 33042 CITY-ST-ZIF DELETE Change Addition TILE 2.1 YITLE BOEHM, DENISE 2.2 NAME 1171 COATES LANE STREET ADDRESS 2.3 STREET ADDRESS **CUDJOE KEY FL** CUDJOE KEY FL 33042 2.4 CITY-ST-ZIP CHY-ST-ZP DELETE Change Addition THILE 3 1 TITLE NAME 3 2 NAME 3 3 STREET ADDRESS STREET ADDRESS DITY-ST-78 3 4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4 4 CITY - ST - ZIP DELETE Change Addition 51 TITLE Tria F NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZP 5.4 CITY-ST-ZIP DELETE Addition 6.1 TITLE THEF NAME **62 NAME** STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY-ST-ZIP

14. 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 13 if changed, or on an attachment with an address

CITY - \$1 - 26

FILED

Feb 07 1997 8:00am

Secretary of State