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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000017465 (3)

REGAL CONSULTING SERVICES, INC.

Principal Place of Business

Mailing Address

FILED Apr 16 1997 8:00am Secretary of State



19286 DELAWA BOCA RATON		19286 DELAWARE COURT BOCA RATON FL 33434-2624						
				Date Incorporated or Qualified 03/07/1994	d 3a. Date of Last Report 05/01/1996			
2. Principal P	lace of Business	2a. Mailing Address 26		4. FEI Number 65-0481654		Applied For Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred			
City & State		City & State	·		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip 24	Country 25	Zip	Country 30	y	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
<u>•1</u>	g. Name and Address of Current				10. Name and Address of New Reg	gistered Agent		
LAN	MBERTUS, ARTHUR W		81	Name				
BARNETT BANK TOWER - SUITE 604 2929 E. COMMERCIAL BLVD.			82	Street A	eot Address (P.O. Box Number is Not Acceptable)			
	RT LAUDERDALE FL 33308		83					
			84	City		FL 85	Zip Code	
11, Pursuant office or r agent. I a SIGNATURE	to the provisions of Sections 607.0502 egistered agent, or both, in the State in familiar with, and accept the obligations of the section of	of Florida. Such change was a ttions of, Section 607.0505, Flor	ulhorized b rida Statute	y the corpo s.	orporation submits this statement for the pration's board of directors. I hereby acceptions are reinstated.	urpose of chang It the appointme	ing its registered nt as registered	
40	OFFICERS AND		13.	ent signatore re	ADDITIONS/CHANGES TO OFFIC		TORS IN 12	
12.	D	DELETE	1,1 TITLE		ADDITIONS/CHANGES TO OFFIC	Ch:		
NAME	BOLING, BOB SR.						•	
STREET ADDRESS	19286 DELAWARE COURT			TADDRESS				
CITY-ST-ZIP	BOCA RATON FL 33434		1.4 CITY-	ST-ZIP				
TITLE	D DELETE 2.		2.1 TITLE			Chi	inge 🔲 Addition	
NAME	OYOLA, MANUEL		. 2.2 NAME					
STREET ADDRESS	19286 DELAWARE COURT	2.3 \$		T ADDRESS				
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP				
TITLE		DELETE	3.1 TITLE			☐ Ch	ange L.J. Addition	
NAME			3.2 NAME					
STREET ADDRESS				TADDRESS				
CITY-ST-ZIP		DELETE	3.4. CITY- 4.1 TITLE	SI - ZIP		☐ Chi	nnge Addition	
TITLE NAME		_j vaca	4. 2 NAME		•			
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP			4.4 GITY-					
TITLE		DELETE	5.1 TITLE	31 2.		Chi	ange 🔲 Addition	
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREE	T ADDRESS				
CITY-ST-ZIP			5.4 CITY-	S1 - ZIP				
TITLE		DELETE	6.1 TITLE			☐ Ch	ange 🔲 Addition	
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREE	T ADDRESS				
CITY-ST-ZIP			6.4 CITY-1	ST - 7IP				

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.