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 # P94000031112 (3)

MANAGEMENT CONSULTING & SALES CORP.

Principal Place of Business Mailing Address										4 IEBVALDA 110 10345 DÄRAF ODDAL ODSAL DOSAL DODA 22509 TAORT NAOR AFOLD LIBE 10091					
20525 LINKSVIEW WAY BOCA RATON FL 33434					20525 LINKSYIEW WAY BOCA RATON FL 33434-4262					-					
										3.	Date Incorporated or Qualified 04/25/1994		ate of Last Re 111/1996	eport	
	2. Principal Place of Business				2a. Mailing Address					4.	FEI Number	<u></u>	Ap	plied For	
21					26						65 -6 030305			t Applicable	
22	Suite, Apt. :	#, etc		27	Suite, Apt. #, etc.					5.	Certificate of Status Desired		\$8.75 / Fee Re		
	City & State				City & State					6.	Election Campaign Financing		\$5.00	May Be	
23					28						Trust Fund Contribution		Added 1	o Fees	
	Zip L	Country			 			untry			This corporation has liability for in			. 199.032,	
24		25 29 30 9. Name and Address of Current Registered Agent				30					No No				
								ΙÑ	Name	10.	Name and Address of New Reg	lesta an	Agent		
MAURER, JANI E ESQ.							81								
1489 W. PALMETTO PARK RD.									street Addres	s (F	O. Box Number is Not Acceptab	le)			
SUITE 440												-			
BOCA RATON FL 33431					83										
							84	ļ	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 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 reagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.													s registered		
	agent. Lar	m familiar w	ith, and accept the ob	ligations o	f, Section 607.050	5, Florida	Statutes	S	o corporation		source of an ectors, 1 Horoby accep	· in Cupp	ionitino il do	709/8/0/00	
s	GNATURE														
_		Signaturo, typed	Corporated name of registered				<u>-</u> -	ent s	ignature required			DATE			
12	z. ILE	PSTD	OFFICERS /	AND DIREC	DELETE		.1 TITLE	····			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR Change	S IN 12	
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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.

61 TITLE

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY - S1 - ZIP

DELETE

FILED

Feb 10 1997 8:00am

Secretary of State

E STRIKORE IND IDAN BIRKE ASKIN DRIKE ADDIN SDIGO OFFRE INDEX 1888D SIDED INTO IDDA

Change

Addition