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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P94000066031 (3)**1. Corporation Name

PROPERTY TAX CONSUTANTS, INC.

FILED Mar 06 1997 8:00am Secretary of State

|--|--|--|--|--|--|

Principal Place of Rus ness GULFSTREAM PROMENADE 656 E. HALLANDALE BEACH BLVD HALLANDALE FL 33009		GULFSTREA 856 E. HALL	Mai ^a ing Address Gulfstream promenade 656 E. Hallandale Beach Blyd Hallandale fl. 3300 9 4422		T 400 1100 T MA 48411 BYEN BERN BOWN BOWN BUILD BYING BYING BYING HARD HARD HARD HARD HARD HARD HARD HARD					
							3. Date Incorporated or Qualified 08/09/1994		te of Last 1/1996	Report
2. Principal Place of Busin	icss	2a. Mailing 26	Address				4. FEI Number 59-2772622	****		applied For
Suite Apt #, etc			pt. #, etc.				***************************************	•		lot Applicabl Additional
22		27					5. Certificate of Status Desired	X		Required
City & State		City & S	State				6. Election Campaign Financing		\$5.00) May Be
23		28					Trust Fund Contribution			to Fees
Ζφ 24	Country 25	Zip		Cour	ntry		8. This corporation has liability for i			s. 199.032,
	and Address of Cur	29 29 rent Registered Ag	ent	30			Florida Statutes 10. Name and Address of New Re	Yes _		
BECK, STANLE					81	Name	io, italijo alia ridarabo di itali ita	giolojou z	Bour	
GULFSTREAM					-	Carran Antal	(P.O. B. A.)			
	DALE BEACH BLV	D		:	82	Street Add	ress (P.O. Box Number is Not Acceptab	łe)		
HALLANDALE F	L 33009				83					
				-		0:1:				
1				ŀ	84	City		FL.	85 Zip	Code
SIGNATURE Source types	er on a stranger of registered	agent and lide if applicable	. (NV)							
4.0	ALC: ELCO E CO.C.		; (lact)		Ager	nt signature requi	ired when reinstating)	DATE		
12.	OFFICERS	AND DIRECTORS		13.		nt signature requi	ired when reinstating) ADDITIONS/CHANGES TO OFFIC			
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To hereby comy that the information supplied with this liting does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. Flurther 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 Lam an officer or director of their provation 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 Brock 11 if changed, or on as all techniques.

SIGNATURE: