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

Mailing Address

SHITE 400

1900 CORPORATE BLVD

BOCA RATON FL 33431

2a. Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

621 N.W. 53RD ST

BOCA RATON FL 33487

CICNATHDE.

Principal Place of Business

SUITE 320



FLORIDA DEPARTMENT OF STATE

FILED

Jan 20 1998 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

Applied For

3. Date incorporated or Qualified

09/30/1994

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000072077 (8)

WYNN KENT CONSULTANTS, INC.

21 26 Not Applicable 65-0527357 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes \(\sigma\) No Zip Country 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name KENT, IRWIN I 1900 CORPORATE BLVD Street Address (P.O. Box Number is Not Acceptable) SUITE 400W 83 **BOCA RATON FL 33431** 84 City 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 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1.1 TITLE KENT, IRWIN I NAME 1.2 NAME 1900 CORPORATE BLVD. SUITE 400W 1.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 1.4 CITY-S1-ZIP DELETE ☐ Change Addition TITLE 21 TITLE KENT, KENNETH NAME 2.2 NAME 1900 CORPORATE BLVD, SUITE 400W STREET ADDRESS 2.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 2.4 CITY - ST-ZIP DELETE Addition TITLE 3.1 TITLE Change NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELFTE Change Addition TITLE 4.1 1/11/2 NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - \$1 - ZIP TITLE DILFTE 5.1 TITLE Change Addition 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-7IP CITY-ST-ZIP DELETE TITLE 6.1 TITL€ Change ___ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 14. Thereby 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 eath; 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

- D Cent 16/98 516-984-1174