

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000087703 (2)

1. Corporation Name

THE MASTERS CONSULTING GROUP INC.



Principal Place of Business

Mailing Address

231 RUBY AVENUE
SUITE E
KISSIMMEE FL 34741

231 RUBY AVENUE
SUITE E
KISSIMMEE FL 34741

3. Date Incorporated or Qualified

12/01/1994

3a. Date of Last Report

06/29/1995

2. Principal Place of Business:

2a. Mailing Address

21 1633 E. BRONSON HWY.

26 Suite, Apt. #, etc.

22 SUITE 218

27 Suite, Apt. #, etc.

23 City & State

28 City & State

KISSIMMEE FL

24 Zip 34744 25 Country

29 Zip 30 Country

4. FEI Number

59-3284010

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

BECKHAM, GEORGE
231 RUBY AVENUE
SUITE E
KISSIMMEE FL 34741

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 1633 E. BRONSON HWY #218

84 City KISSIMMEE

FL

85 Zip Code 34744

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

George Beckham

(NOTE: Registered Agent signature required when reinstating)

DATE

6-14-96

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME BECKHAM, GEORGE
STREET ADDRESS 14907 WARDS ROAD
CITY - ST - ZIP ORLANDO FL

TITLE S ☐ DELETE

NAME BECKHAM, GLENDA
STREET ADDRESS 14907 WARDS ROAD
CITY - ST - ZIP ORLANDO FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

George Beckham

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-14-96

407 931 3200

DATE

Daytime Phone

CR2E034 (3/96)