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

PROFIT



FLORIDA DEPARTMENT OF STATE

FILED May 05 1998 8:00am

ANNU	JAL REPORT 1998		Secretary of DIVISION OF CO	of State		Secretar	y of State
DOCUMENT # P94 0000 91612							
MORPHUSTAR ASSOCIATES CONSULTING, INC.							•
Principal Plac	e of Business	N	Mailing Address				
2332 N.E. 28th COURT 2332 N.E. 28th COURT LIGHTHOUSE FL LIGHTHOUSE FL					DO NOT WRITE IN	THIS SPACE	
		33064		3306	4	3. Date Incorporated or Qualified	
z. Principal P	lace of Business	26	Mailing Address			4. FEI Numbler 65-0553777	Applied For Not Applicable
Suite, Apt.			Suite, Apt. #, etc.	0.4.4		Certificate of Status Desired	\$8.75 Additional
City & State	e MOOD BU	M / D 27	6136 W005 City & State	BULY A	·D.	6. Election Campaign Financing	Fee Required \$5.00 May Be
a Boc	A NATON	FL 28	Raca RA1			Trust Fund Contribution	Added to Fees
Zip 33	33 25 Coun	try 29	Zip 3 3 4 3 3 30	Country		This corporation owes or has paid to Personal Property Tax due June 30. Name and Address of New Regist	Yes No
			stered Agent	81 Name		10. Name and Address of New Regist	ered Agent
PARADISO, DON A.						s (P.Q. Box Number is Not Acceptable)	
SETY DEER FIELD PLACE						5 (1 . Q. Box (Mainloon to Mot Acceptable)	
LAKE	WOLTH,	FL 22.11.2	•	83			
• 1	•••	53765		84 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 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 nar	me of registered agent and little	8 if applicable. (NOTE: R	egistered Agent signature	e required	when reinstating)	DATE
12.		OFFICERS AND DIRE		13.		ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN 12
TITLE	SEC RETAR		OELETE .	1,1 TITLE		-	☐ Change ☐ Addition
NAME	morbenste	SAWER HY		1.2 NAME			
STREET ADDRESS		360 40820	33062	1.3 STREET ADDRESS	}		<u> </u> !
CITY-ST-ZIP TITLE	VICE PAESI	BEACH, FL	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	SEL	1ET444	Change Addition
NAME		4戸、VICTOAI		2.2 NAME		LGE JIGTON LABOUN A	
STREET ADDRESS	2332 P.E.	28th COULT	` _	2.3 STREET ADDRESS	612	6 E LYBROOM 98	
CITY-ST-ZIP	LIGHT HOUS	E POINT, FL	33064	2. 4 CITY-ST-ZIP	80	16 WOODBULY 20 CA NATON FL 330	133
TITLE	PRES IDENT		OELETE	3.1 TITLE	PAE	SIDENT	Change Addition
NAME	MOLGERSTE	AN DAVID	٦٠	3.2 NAME	MO	LLENSTEAN DAVID A	4
STREET ADDRESS	F37LNE	28th COURT SE POINT	FL 33064	3.3 STREET ADDRESS	017	CA RATOS FL 3304	
CITY-ST-ZIP	DI GH I HDS	36 10121	DELETE	3.4. CITY-ST-ZIP	30	LA JEATON PE 3 300	Change Addition
NAME			_	4. 2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY - ST - ZIP			
TITLE			DELETE	5.1 TITLE	ļ		☐ Change ☐ Addition
NAME CERTAIN ADDRESS				5.2 NAME			.12
STREET ADDRESS CITY-ST-ZIP				5.3 STREET ADDRESS 5.4 CITY-ST-ZIP			76 B
TITLE			DELETE	6.1 TITLE	 	000002512	⊃ = t⊒ change
NAME				8.2 NAME]	000002512 -05/06/9801014	~~017
STREET ADDRESS				6.3 STREET ADDRESS	1	***150.00	
OTV . 67 . 710				4 4 0/704 07 700	I		

14. I 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 60%, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

APRIL 24 1998

954.712. 4050