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

PROFIT CORPORATION ANNUAL REPORT

1998

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CITY-ST-ZIP

SIGNATURE.



FLORIDA DEPARTMENT OF STATE

FILED

May 11 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000018297 (8)

AMERICAN BUSINESS CONSULTING GROUP, INC.

Principal Place of Business Mailing Address 9507 SW 160 STREET 9507 SW 160 STREET SUITE 290 DO NOT WRITE IN THIS SPACE MIAMI FL 33157 MIAMI FL 33157 3. Date Incorporated or Qualified 03/06/1995 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 21 65-0562017 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes Yes ☐ No 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent HALBERG, JASON M 9507 SW 160 STREET 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 290** 83 **MIAMI FL 33157** 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) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change TITLE DELETE 1.1 TITLE Addition NAME HALBERG, JASON M 1.2 NAME CR2E034 9507 SW 160 ST #290 STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33157** CITY-ST-ZIP 14 CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE HALBERG, MICHAEL A NAME 2.2 NAME 9507 SW 160 ST #290 STREET ADDRESS 2.3 STREET ADDRESS **MIAMI FL 33157** CITY-ST-ZIP 2.4 CITY-ST-ZIP X DELETE Change Addition TITLE 3.1 TITLE HALBERG, ERIC S 3.2 NAME 9507 SW 160 ST #290 STREET ADDRESS 3.3 STREET ADDRESS **MIAMI FL 33157** CITY-ST-ZIP 3.4. CITY - ST-ZIP ☐ DELETE Change ■ Addition TITLE 4.1 TITLE GREENBERG , FRED H. 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS MIAMI FL 33157 CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-\$T-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

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 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 13 if changed, br on an attachment with an address.

29/98