FIL	E NOW	: FILI	NG FEE	AFTER	MAY 1	IS \$2	25.00			:		Pegi
PROFIT CORPORATION ANNUAL REPORT 1996				FLORIDA DEPARTMEN Sandra B. Mor Secretary of S DIVISION OF CORPO		OF STATE am te			APPRO ANI FILE	) )		
DOCU		# !	POSOO	 			TATIONS		961	NOV 19 A	N 10: 5	8
1. Corporatio	n Name	1	P9500	SEC	RETARY O	F STATE	•					
FINAN	NCIAL SYS	TEMS	CONSULTIN	ig Grou	JP, INC.		!		PALL	AHASSEE, He den dom dem	FLORID	A Ber 1888 (1884)
Principal Place	e of Business			Mailing	Address							
11329 S.W. 109TH RD.		.11228 S.W. 100TH RD.										
MAMI FL 53178			- <del>SUITE C -</del> -MIAMI FL-83176						3. Date Incorporated or Qua 04/17/1995	lified 3a. Da	te of Last F	Report
2. Principal Place of Business			AVE. 26 13155 SW 74 AVE						4. FEI Number 65 - 058	. 00 ,	$\vdash$	Applied For
Suite, Apt. #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desire			Not Applicable  5 Additional
City & State					& State	FL			6. Election Campaign Finance	ing _		Required  May Be
23 74 m 24 250 24 331	7	Count	ry	Zip	NAMI		ntry		Trust Fund Contribution  8. This corporation has liability	v for intanoible t	Adde	d to Fees
24 221	9. Name	nd Addr	ess of Current	128 /	U 30	30				)Yes □No		100.002,
PETERS, DAVID T  11329 C.W. 109TH RD.  SUITE C  MIAMI FL 99176  81 Name  82 Street Address (P.O. Box Number is Not Acceptable)  1315 S S 74 H C  83 84 City M A Annual El 85 Zig Code C7												
11. Pursuant to the provisioner of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  DAVIO  TETERS.  MESIDEN  INCOMP												
12.	Signature typed or		of registered agent and DFFICERS AND [	title if applicable	(NO	TE: Registered /	Agent signature i	required wh	en reinstating)	10/30 DATE	146_	
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AME			ā	_		6. 1 TITLI 6.2 NAME			/ <b>)</b>	Lunt	j Change	Addition
TREET ADDRESS							ET ADDRESS		U	1200	16	
4. I do hereby o	certify that the	Informatio	on supplied with	this filing is v	voluntarily furnical	6.4 CITY		ify for the		(		
oath: that i a	am an officer o	r director	of the corneration	n or the reco	phyor or trustee	* 10port 10 p	rue and acc I to execute	urate an	e exemption stated in Section 1 of that my signature shall have ort as required by Chapter 607	।ਭ.07(ਤ)(k), Flori the same legal e , Florida Statute:	oa Statutes ffect as if n s; and that	s. I further nade under my name
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 signature shall have the same legal effect as if made under appears in Block 12 or Block 13 if changed, of on an attachment with an address.  SIGNATURE:  SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR												

11/12/96

To WHOM IT MAY CONCORN:

WE FILED OUR ANNUAL STATEMENT IN AUGUST 1996 AND ATTACHED CHECK NO. 1102 DATED 8/6/86 IN THE AMOUNT OF \$225. TO PATE THIS CHECK HAS CASHED. YOU DID CONFIRM BEEW RECEPT OF OUR STATEMENT BUT DIO NOT CASH THE CHECK. ATTACHED NEW CHECK (ROPACEMENT) AND FILLED OUT STATEMENT. PLEASE AT (305) 539-6922 ANY QUESTIONS

> DAVID PETERS PRESIDENT, PECE INC.