FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

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1. Corporation	MENT # P950(CONSULTING, INC.	00032978 (5	5)		1 (0.0) (0.0) 100 1010 10111 01111 01111 01111	ija Bejai Belka sinta i	8(8 18(i) (888) 18(i) 1861	
Principal Place	of Business	Mailing Address						
338 S.W. 80 NORTH LAL		S.W. 80TH TERRACE RTH LAUDERDALE FL 33068						
					3. Date Incorporated or Qualified 04/27/1995	3a. Date of La		
		2a. Mailing Address			4. FIEI Number	(30	Applied For Not Applicable	
Suite, Apt. i	t. etc.	Suite, Apt. #, etc.			45 0300	4.2	.75 Additional	
		27			5. Certificate of Status Desired	T	ee Required	
City & State		City & State			6. Election Campaign Financing		5.00 May Be	
23	Country	700	Cour	ata :	Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s 199.032.			
Zip 24]	Country 25	Zip 29	Cour	itry		Intarigible tax und	ors 199.032,	
<u></u>	9. Name and Address of Curre		1001		10. Name and Address of New Registered Agent			
				81 Name				
FRIEDI	MAN, MARC		}	82 Street Add	ress (P.O. Box Number is Not Acceptat	ole)		
	W. 80TH TERRACE							
NORTH	1 LAUDERDALE FL 33068		ĺ	83				
				84 City		FL 85	Zip Code	
11. Pursuant t	o the provisions of Sections 607.050	02 and 607.1508. Florida Statute	es, the abov	ve-named corpo	ration submits this statement for the pu		ts registered office	
or register familiar wit	ed agent, or both, in the State of Flo th, and accept the obligations of, Sec	rida. Such change was authoriza ction 607.0505, Florida Statutes	ed by the c	orporation's boa	ration submits this statement for the pu ard of directors. I hereby accept the app	ointment as regisi	lered agent. I am	
SIGNATURE	Signature, typed or printed name of registered ago	o' e. d trile it anglicable (NO	Tr Registered	Agent signature require	ed when reinsteinni	DATE		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OF	ICERS AND DIRE	CTORS IN 12	
TITLE	PTD	☐ DELETE	1.1 1)	TLE		☐ Cha	ange 🗌 Addition	
NAME	KELLAR, TEDDY S		1.2 NA	ME				
STREET ADDRESS			1.3 ST	REET ADDRESS				
CITY - ST - ZIP	NORTH LAUDERDALE FL	33068		IY-SI-ZIP				
TITLE	VSD	☐ DELETE	2 1 Ti			☐ Cha	ange	
NAME	KELLAR, PATRICIA L		2 2 NA					
STREET ADDRESS	338 S.W. 80TH TERRACE	00000		REET ADDRESS				
CITY-ST-ZIP TITLE	NORTH LAUDERDALE FL	33068 DELETE	2 4 CI	TLE		☐ Chi	ange	
NAME		<u></u>	3.2 NA					
STREET ADDRESS				IREE1 ADDRESS				
CITY - ST - ZIP			3 4 01	TY-ST-ZIP				
TITLE		☐ DELE1E	4.11	TLE		☐ Ciha	ange 🔲 Addition	
NAME			4.2 NA	ME]				
STREET ADDRESS			4.3 ST	REET ADDRESS				
CITY - S1 - ZIP		► N°(FTE		TY-ST-ZiF			ange 🔲 Addition	
TITLE		DELETE	5 1 11	i		[] նհ	auða 🗀 voginari	
NAME OTD: EL ADDOCCO			52 NA					
STREET ADDRESS				REET ADDRESS				
CHY-ST-ZIP TITLE		DELETE	6 1 Ti	TY-ST-ZIF	40 / 4 - 4 - 10 - 10 - 10 - 10 - 10 - 10 - 1	☐ Ch	ange Addition	
NAME			6 2 NA				_	
STREET ADDRESS				REET ADDRESS				
CITY-ST-ZIP				TY-ST-ZIP				
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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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE (Y)

LOUST TELLE TED DY S. KELLAR 4-14-56
Date OF PRINTED NAME OF SIGNING OFFICE OF DIRECTOR

305 9435015