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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000037030 (0)

## MECON MODELING EDUCATION & CONSULTING CORPORATIO

**FILED** Mar 20 1997 8:00am Secretary of State



Principal Place of Business  1415 N. ATLANTIC AVE.		Mailing Address			C 10011801 JIN 10101 BAIN BBILL BOTH BUING HIN 10011 GBIBS 15111 GBIL INDY			
		1415 N. ATLANTIC AVE.						
#8	1 Fr 66004	B	FM 4					
COCOA BEACH	1 FL 32831	COCOA BEACH FL 3293	1-5214			T 6		
03		00			3. Date Incorporated or Qualified 05/08/1995	3a. Date 03/04/		ероп
2. Frinc pall	face of Business	2a. Mailing Address			4. FEI Number		Ap	oplied For
21		26	26		59-3314725		No	ot Applicable
Suite, Apt. #, etc. Suite,		Suite, Apt. #, etc.	, Apt. #, etc.		5. Certificate of Status Desired	$\mathbf{x}$		Additional
22		27		.,	C. Commodite of Stated Desired			aquired
City & State		City & State			6. Election Campaign Financing	<b>\$5.00</b> May Be		
23	, ,	28	<del></del>		Trust Fund Contribution	<u> </u>	Added	to Fees
Zrp Country		Zip E "i	Zip Country		The state of the s	ty for intangible tax under s. 199.032,		
24	25	[29]	30			Yes 📙		
	9. Name and Address of Co	irrent Registered Agent		T	10. Name and Address of New Reg	istered Ag	ent	
	son, thomas f		61	Name				
4871 HAWLEY ROAD COCOA FL 32927			82	Street Add	dress (P.O. Box Number is Not Acceptable)			
				STOCK FOOTOGO (C.O. BOX Hamisor to Hot Floodstable)				
			83					
			84	City		T	DE 700	Code
			"	City		FL	<b>85</b>   Zipi	Joue
SIGNATURE	. Our introduped or per trick are of organize	2 agent and till Tappheable (N	OTE: Ringistered Ag	ent signature req	3-6-97	DATé		
12.		S AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE		IRECTOR	IS IN 12
1 111	D	DELETE.	1 1 TITLE	T			Change	Addition
NAME	WILSON, THOMAS F		1.2 NAME	1				
STREET ADDRESS	4871 HAWLEY ROAD		1.3 STREE	T ADDRESS				
CITY-ST To	COCOA FL 32927		1.4 CITY -	ST-ZIP				
1011		DELETE	21 TITLE				Change	Addition
MA*Al			2 2 NAME					
STREAT ADDRESS			2 3 STREE	I ADDRESS				
001Y-51-20			2 4 CITY	ST-ZIP				
tant		DELETE	3 1 THTLE				Change	Addition
NAME			3.2 NAME					
\$180 TACORESS			3.3 STREE	T ADDRESS				
CHY-SI (iii)			3 4. CITY -	ST- ZIP				
1 ILF		DELETE	41 TITLE				Change	Addition
NAME			4 2 NAME				•	
\$135 1 <b>A</b> f OR: \$5			4.3 STREE	F ADDRESS				
CHY 51 70			4.4 CETY -	ST- ZIP				
1 111		DELETE	5.1 TITLE			Ĺ	Change	Addition
HAM			52 NAME					
	1		5.3 STREE	I ADDRESS				
\$1963 LADORESS	!							
SHY-SI-zu		·	5.4 CITY -	ST - ZiP			,	
		DELETE	5.4 CITY - 6.1 TITLE	ST - ZiP			Change	Addition
SHY-SI-zu		[_] DELETE		ST-ZBP			Change	Addition
SHY-SI-70 TODE		[_] DELETE	6.1 TITLE 6.2 NAME	ST-ZIP T AODRESS		<b>.</b>	Change	Addition
SHY-ST-Z0 HILE AAMS SPEET ALORESS SHY-ST-Z0			6.1 TITLE 6.2 NAME 6.3 STREE 6.4 CITY	f address St-zip	ed in Section 119.07(3)(i), Florida Statutes			

wered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

407-783-6331