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

PROFIT CORPORATION ANNUAL REPORT

1998

NAME

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P95000040322 (6)

FOX CONSULTING CORPORATION

Principal Place of Business Mailing Address						- 1 100/1907 119 10/07 BIAN OBIN OBIN OBIN OBIN OBIN OBIN OBIN OBI			
6030 NW 96 WAY 6030 NW 96 WAY									
PARKLAND		PARKLAND FL 33076							
						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified			
						05/16/1995			
2. Principal Place of Business		2a. Mailing Address				4. FEI Number	- -	Applied For	
21		26				65-0590270		Not Applicable	
Suite, Apt. #, etc.		├ ──	Suite, Apt. #, etc.			5. Certificate of Status Desired	4 +	Additional	
City & State		27 Ca . 8 Ctale	27 City & State					Required	
23		tern 1	tran 1			6. Election Campaign Financing Trust Fund Contribution		0 May Be d to Fees	
			Cour	Country				· · · · · · · · · · · · · · · · · · ·	
24	25	29	30	,		This corporation owes or has paid to Personal Property Tax due June 30		X No	
9. Name and Address of Current Registered Agent						10. Name and Address of New Regis		A	
FOX, WILLIAM L					Name				
	030 NW 96 WAY				<u> </u>	100 B N 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		· · · ·	
PARKLAND FL 33076				B2	Street Addre	ess (P.O. Box Number is Not Acceptable)			
''	AND TE SOOTS		83						
				B4	City		FL 85 Zip	o Code	
11. Pursuant t	o the provisions of Sections 607.0	0502 and 607 1508, Florida	a Statutes, the ab	ove-	named corp	oration submits this statement for the purp	pose of changing	its registered	
office or re	egistered agent, or both, in the Sta m femiliar with, and a copt the ob	ate of Florida. Such chang Ikaations of Section 607.0	je was authorized 505. Elorida Stati	l by t ites	the corporati	on's board of directors. I hereby accept the	he appointment a	is registered	
SIGNATURE	1111112								
SIGNATURE	Signature, typed or printed name of registered	agent as dititle if applicable	(NOTE: Rag stered	Agent	signature require	od when reinstating)	DATE		
12.	OFFICERS A	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICER			
TITLE	P	DELETE 1.1		LE			☐ Change	Addition	
NAME	FOX, WILLIAM L.		1.2 NAME						
STREET ADDRESS	6030 NW 96 WAY	1.3 STREET ADDRESS		DORESS					
CITY-ST-ZIP			1.4 CIT		- ZIP				
TITLE	8	DELETE 2.1		LE			☐ Change	Addition	
NAME			2.2 NA	ME					
STREET ADDRESS			2.3 \$11	EET A	DORESS				
CITY-ST-ZIP	PARKLAND FL	the state of the s		Y-ST				** **********************************	
TITLE		DELETE 3.1				rector A Eur	☐ Change	Addition	
NAME			3.2 NA		Vi	rgina A. Fox 30, NW 90 Way			
STREET ADDRESS					DDRESS 60	30 NW 47 W			
CITY-ST-ZIP			3.4. C/		-ZIP Pa	ricland FL 3307L	Charac	Addition	
TITLE							☐ Change	Addition	
NAME			4. 2 NA						
STREET ADDRESS	¹⁷¹ 1			DORESS					
CITY-ST-ZIP			4.4 CIT		ZIP		Chann	Addition	
TITLE		וין טנו					☐ Change	Addition	
NAME			5.2 NA						
STREET ADDRESS					DDRESS				
CITY-ST-ZIP		□ DEL	5.4 CIT		- ZIP		Change	Addition	
TITLE		t 1 DFI	FTF B 61 TIT	F	1		I I LIDADOE	i i Addition	

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 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.

6.3 STREET ADDRESS

FILED

May 06 1998 8:00am

Secretary of State