

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

FILED

Feb 24 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000064467 (0)

1. Corporation Name
INDEPENDENT CONSULTING, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business 5460 N. OCEAN DR SUITE 98 RIVIERA BEACH FL 33404 US	Mailing Address % MARY DAWN CLARK 5460 N. OCEAN DRIVE, SUITE 913 RIVIERA BEACH FL 33404
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2. Principal Place of Business 21 8213 QUAIL MEADOW TRACE Suite, Apt. #, etc 22 City & State 23 W. PALM BCH, FL 24 33412 25 USA	Mailing Address 26 8213 QUAIL MEADOW TR Suite, Apt. #, etc 27 City & State 28 W. PALM BCH FL 29 33412 30 USA
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3. Date Incorporated or Qualified 08/21/1995	4. FEI Number 65-0612496	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

9. Name and Address of Current Registered Agent CLARK, MARY D 5460 N. OCEAN DRIVE SUITE 913 RIVIERA BEACH FL 33404	10. Name and Address of New Registered Agent 81 Name CLARK, Mary D. 82 Street Address (P.O. Box Number is Not Acceptable) 8213 QUAIL MEADOW TR. 83 84 City W. Palm Bch 85 State FL 86 Zip Code 33412
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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)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	CLARK, Mary D.
NAME	CLARK, MARY D	1.2 NAME	CLARK, Mary D
STREET ADDRESS	5460 N. OCEAN DRIVE, SUITE 913	1.3 STREET ADDRESS	8213 QUAIL MEADOW TRACE
CITY-ST-ZIP	RIVIERA BEACH FL 33404	1.4 CITY-ST-ZIP	West PALM BCH, FL 33412
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Mary D. Clark

Feb 20, 1998 561-691-3917

CR2E034 (10/97)