

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

FILED

Mar 03 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P95000068405 (6)

1. Corporation Name
CONSULTING AND TECHNOLOGY SOLUTIONS, INC.



Principal Place of Business
300 CAPTAIN'S WALK, #102
DELRAY BEACH FL 33483

Mailing Address
300 CAPTAIN'S WALK, #102
DELRAY BEACH FL 33483-6031

3. Date Incorporated or Qualified 09/06/1995
3a. Date of Last Report 03/01/1996

2. Principal Place of Business (21-24) and 2a. Mailing Address (26-30) fields with sub-sections for Suite, Apt. #, etc., City & State, Zip, and Country.

4. FEI Number 65-0605500, Applied For Not Applicable, 5. Certificate of Status Desired \$8.75 Additional Fee Required, 6. Election Campaign Financing \$5.00 May Be Added to Fees, 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

MULLIN, JAMES G
2263 NW BOCA RATON BLVD., #205
BOCA RATON FL 33431

10. Name and Address of New Registered Agent

81 Name, 82 Street Address (P.O. Box Number is Not Acceptable), 83, 84 City, 85 Zip Code FL

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 filer if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

Table with columns for Title, Name, Street Address, City-St-Zip, and a DELETED checkbox. Row 1: D SCHRODER, ERIN E, 300 CAPTAIN'S WALK, #102, DELRAY BEACH FL 33483.

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Table with columns for Title, Name, Street Address, City-St-Zip, and checkboxes for Change and Addition. Rows 1.1-6.4.

14. I do 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: Erin E. Schroder (Erin E. Schroder 2/25/97 (561) 246-1831)

CR2E034 (9/96)