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FILED

May 09 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 # P95000079386 (5)

1. Corporation Name

PHOENIX FINANCIAL CONSULTANT SERVICES, INC.

Principal Place of Business

1689 HIATUS ROAD  
SUITE 192  
PEMBROKE PINES FL 33026

Mailing Address

1689 HIATUS ROAD  
SUITE 192  
PEMBROKE PINES FL 33026-2129



3. Date Incorporated or Qualified  
10/17/1995

3a. Date of Last Report  
02/16/1996

4. FEI Number

65-0532526

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$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

10. Name and Address of New Registered Agent

FOX, GARY LEE  
1689 HIATUS ROAD  
SUITE 192  
PEMBROKE PINES FL 33026

81 Name

MARGOT P. KENNEDY

82 Street Address (P.O. Box Number is Not Acceptable)

1689 N. HIATUS ROAD

83

SUITE 192

84 City

PEMBROKE PINES

FL

85 Zip Code

33026

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

*Margot P. Kennedy*  
Signature, typed or printed name of registered agent and true if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4-28-97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  
NAME FOX, GARY LEE  
STREET ADDRESS 1689 HIATUS ROAD, SUITE 192  
CITY-ST-ZIP PEMBROKE PINES FL 33026

DELETE

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

Change Addition

TITLE VD  
NAME CORDERO, FRANK  
STREET ADDRESS 1689 HIATUS ROAD, SUITE 192  
CITY-ST-ZIP PEMBROKE PINES FL 33026

DELETE

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

Change Addition

TITLE STD  
NAME KENNEDY, MARGOT P  
STREET ADDRESS 1689 HIATUS ROAD, SUITE 192  
CITY-ST-ZIP PEMBROKE PINES FL 33026

DELETE

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

Change Addition

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 of this report or in an attachment with this report.

SIGNATURE:

*Margot P. Kennedy*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARGOT P. KENNEDY

4-28-97

954-581-2457

Date Daytime Phone #

CR2E034 (9/96)