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FILED

Feb 26 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 # 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

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/17/1995

4. FEI Number

65-0532526

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

KENNEDY, MARGOT P
1689 HIATUS ROAD
SUITE 192
PEMBROKE PINES FL 33026

10. Name and Address of New Registered Agent

81 Name PATRICIA LINCOLN
82 Street Address 1689 HIATUS RD.
83 SUITE 192
84 City PEMBROKE PINES FL 85 Zip Code 33026

11. Pursuant to the provisions of Sections 607.05(2) 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 607.05, Florida Statutes.

SIGNATURE

PATRICIA LINCOLN

PATRICIA LINCOLN

2/9/98

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

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

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

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE SK PATRICIA LINCOLN
1.2 NAME PATRICIA LINCOLN
1.3 STREET ADDRESS 1689 HIATUS RD., STE. 192
1.4 CITY-ST-ZIP PEMBROKE PINES, FL. 33026 ☐ Change ☒ Addition

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

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

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

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

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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

PATRICIA LINCOLN

PATRICIA LINCOLN

2/9/98

(991) 581-2457

CR2E034 (10/97)