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

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000096541 (4)

MAYS CONSULTING, INC.

Principal Place of Business 60 HAMMOND DRIVE MIAM! SPRINGS FL 33166 Mailing Address

60 HAMMOND DRIVE MIAMI SPRINGS FL 33166

## FILED Jan 27 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

A. Maling Address   A. Maling Address   A. Maling Address   A. FEI Number   St-Orticate of Status Desired   Not Applicable   Not Applicable   Status Applicable   Not Applicab										12/18/1995			
Suite Apt. 4, etc.   Suite Apt	2. Principal F	lace of Busine	2a. Mailing Address								Applied For		
Suite. Apt. 4, etc.   Suite. Apt. 4, etc.   Suite. Apt. 4, etc.   Suite. Apt. 4, etc.   Suite.   Sc. Certificate of Status Desired   Se. Personal Processing Praint Fund Compraging Prainting Compraging Prainting Combination   Sc. OW May Be 20   28   29   30   Suite   St. Owner Presonal Provided Prese Address of Current Registered Agent   St. Name and Address of Current Registered Agent   St. Name and Address of Current Registered Agent   St. Name and Address of New Registered Agent   St. Nam	21	•			26					65-0702811		Not Applicable	
28   Country   Zip   Country   Zip   Country   25   Zip   Country   25   Zip   Country   27   27   27   27   28   Zip   Zip   Country   28   Zip   Country   29   Zip   Zip   Country   28   Zip   Country   28   Zip   Country   29   Zip   Zip				Suite, Apt. #, etc.						5. Certificate of Status Desired			
28		le		City &	City & State					6. Election Campaign Financing	\$5.0	0 May Be	
25   29   30					28						•	* .	
MAYS, STEPHANIE B 60 HAMMOND DRIVE MIAMI SPRINGS FL 33166  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  84 City  FL  85 Zip Code  11. Pyranant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changin; its registered agent. I am familiar with, and accept the ostiglations of Section 607.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changin; its registered agent. I am familiar with, and accept the ostiglations of Section 607.0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered specific or provisions to board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the ostiglations of Section 607.0503, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  17. ADDITIONS/CHANGES TO	<u> </u>		Country Zip				Country			8. This corporation owes or has paid the	current year	Intangible	
MAYS, STEPHANIE B 60 HAMMOND DRIVE MIAMI SPRINGS FL 33166  82 Street Address (P.O. Box Number is Not Acceptable)  83   84   City   FL   85   Zip Code  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florids Statutes, the above-named corporation automits this statement for the purpose of changing its registered agent, and accept the displacitors of, Section 607.055, Princis Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and maintain with, and accept the only accept the appointment as registered agent. I am familiar with, and accept the only accept the appointment as registered agent. I am familiar with, and accept the only accept the appointment as registered agent. I am familiar with, and accept the only accept the appointment as registered agent. I am familiar with, and accept the only accept the appointment as registered agent. I am familiar with, and accept the only accept the appointment as registered agent. I am familiar with, and accept the only accept the appointment as registered agent. I am familiar with, and accept the only accept the appointment as registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of the appointment as registered agent. I am familiar with a statement for the purpose of th	24			29		30				Personal Property Tax due June 30.	Yes Yes	□ No	
BO HAMMOND DRIVE MIAMI SPRINGS FL 33166  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  84 City FL 85 Zip Code  11. Pursuant to the pursuance of Sections 607 6503 and 607 1538, Periods Statutes, the above-named corporation submits this statement for the pursuance of changing its registered agent, or beat, in the State of Profess Sub-Periods Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and section from the State of Profess Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and the appointment as			Registered A	\gent		ļ.,		10. Name and Address of New Registered Agent					
MAMI SPRINGS FL 33166    B4   City   FL   St   Zip Code	MAYS, STEPHANIE B						81	Name					
MAMI SPRINGS FL 33166  B3  B4 City  FL B5 Zip Code  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, 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, or hard accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Symans, typed or pented remain of registered agent and title if applicable.  MO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  12. NAME  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  14. City St. 22.  MAMS, STEPHANIE B  15. TITLE  16. HARD AMAIN SPRINGS FL 33166  16. City St. 29.  17. ST. 29.  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  10. Change Addition  10. Change Addition  11. ST. 29.  12. ST. 29.  13. ST. 29.  14. City ST. 29.  14. City ST. 29.  15. ST. 29.  16. ST	60 HAMMOND DRIVE						82 Street Address (P.O. Box Number is Not Acceptable)						
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 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, 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, 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, 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, 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, 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, or both in the State of Florida Statutes.  In the state of Florida Statutes was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both in the State of Florida Statutes.  In the state of Florida State of Florida Statutes was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both in the State of Florida Sta	MIAMI SPRINGS FL 33166												
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SIGNATURE   Signature, typed or period name of registered agent and site if applicable.   NOTE: Registered Agent signature required when relinaturing)   DATE	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												
Signature, hyper or printed rame of registered agent and tills 4 applicables.   Coffee Registered Applications   Coffee Registered	office of registered agent, or both, in the state of righted, such change was authorized by the corporation's board of directors it bereby accept the appointment as registered.												
12. OFFICERS AND DIRECTORS  TITLE  D  MAYS, STEPHANIE B  60 HAMMOND DRIVE  MAME STRET ADDRESS  CITY-ST-2P  MAMI SPRINGS FL 33166  DELETE  1.1 TITLE  1.2 NAME 1.3 STREET ADDRESS  CITY-ST-2P  MIAMI SPRINGS FL 33166  1.4 CITY-ST-2P  1.4 CITY-ST-2P  1.5 TITLE  1.5 TIT	SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE												
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MIAMI SPRINGS FL 33166	NAME	MAYS, S	Tephanie B			1.2 N	AME					-	
CITY-ST-ZIP	STREET ADDRESS	60 HAMM	IOND DRIVE		135			.3 STREET ADDRESS				İ	
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14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07/3/(i). Florida Statutos Lifeting continues and the information stated in Section 119 07/3/(ii).						6.4 C)	ry-st-	- ZIP					
	14. I hereby c	ertify that the	nformation supplied with	this filing doe	s not qualify fo	r the eye	mnti	on state	d in Se	ection 119.07(3)(i), Florida Statutes. I further	certify that th	ne 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:

tylani B Mays STEPHANIE B. MAYS 1/14/98

14/98 305 885-1819