## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthain

Secretary of State

DIVISION OF CORPORATIONS

a ngamban ing kanah anin adini banin sahil atina nahah laini adini alsin aisak anin kasi

DOCUMENT # P95000098045 (4)

1. Corporation Name

WINDSOR CONSULTING, INC.

Principal Place of Business Mailing Address  7777 GLADES ROAD, SUITE 210 7777 GLADES ROAD, SUITE 210							
7777 GLADES ROAD. SUITE 210 7777 GLADES ROAD. SUITE 210 BOCA RATON FL 33434 BOCA RATON FL 33434							
					3. Date Incorporated or Qualified 12/29/1995	3a. Date	of Last Report
2. Principal Plac	ce of Business	2a. Mailing Address		,	4. FEI Number	EO	Applied For
1		26			65-06478	<u>5U</u>	Not Applicabl \$8.75 Additional
Suite, Apt. #,	, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		Fee Required
Ca . 9 Ctata	• <u></u>	City & State			6. Election Campaign Financing		\$5.00 May Be
City & State		28			Trust Fund Contribution		Added to Fees
Zip	Country	Zip	Country		8. This corporation has liability for	ntangible ta	x under s. 199.032,
4	25	29	30		Florida Statutes Yes  10. Name and Address of New R		Apent
	9. Name and Address of Cu	irrent Registered Agent	81	Name	- AI	egistereu	Agont
343 ALME	FIRM OF LAWRENCE J SE FILA AVENUE ABLES FL 33134	Megel Chrtd	82 83	7	JOEL J. NADEL ess (P.O. Box Number is Not Acceptat 777 GLADES Suife 210	KD	85 Zip Code
	Made-	0502 post 607 1508 Elorida Sta		1 20	ration submits this statement for the pu	FL rpose of ch	anging its registered off
<ol> <li>Pursuant to or registere</li> </ol>	of all on the Style of	Floods, Such chagge was autho	yyzed by the con	lioration's boa	rd of directors. Thereby accept the app	OF ICTION CO.	Tragistored agents rem
· l	n, and accept the oblightions of.	Se 31 on 607,0505, Florida Statu	:05			4-	18-96
SIGNATURE 🦎	Signal at Typed by Angel Printing of registers	Luje cardita e fajori ake	ប្រហិត្ត មិនក្រុមទទួកAji	ez agrifak festik	d what ten stiding	DATE	•
12.	OFFICER.	S AND DIRECTORS	13.	т	ADDITIONS/CHANGES TO OFF	ICERS AN	Change Addition
TIFLE	PSTD C	☐ DETELE	1 1 HILE				
NAME	NADEL, JOEL S	ME 446	1.2 NAME	I ADDRESS			
STREET ADDRESS	7777 GLADES ROAD, SU	HIE 210	1.3.5 Mei				
CITY-SI-ZIP	BOCA RATON FL 33434	DELETE	2 1 Titt				Change Additio
THTLE NAME		L. 3	2.2 NAME				
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CITY-ST-ZIP			2.4 Cilly	-SF ZIP			
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NAME			3.2 NAM	F			
STREET ADDRESS			3.3 SIH	+1 ADDRESS			
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NAME			4.2 NAM	ľ			
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CITY-SI-ZIP				-ST-Z-P			
TITLE		DE1ETE	6 1 THT				Change Addit
NAME			6.2 NAM	1f			
STREET ADDRESS			6 3 STH	EET ADDRESS			
CITY-ST-Z-P			6.4 C:1)	-ST-ZiP	7 A 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0.07/2004 5	Jorida Statutae I furtho
14. I do hereb certify that oatn; that appears in	by cortify that the information sup it the information indicated on the Ham an officer or director of the ri Block 12 or Block 3 if hange	ngilied with this fling is voluntarily is annual report or supplemental comporation or the receiver or tried, or on an attachment with an annual receiver.	turnished and di annual report is ustee empowere address	oes not qualify true and accu d to execute t	for the exemption stated in Section 1.1 rate and that my signature shall have the seport as required by Chapter 607.	Florida Stal	al effect as if made und utes; and that my name

Model, 4/19/94 (407) 852-2224