

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000000255 (5)
1. Corporation Name
BEHAVIOR MANAGEMENT TRAINING SYSTEMS INC.

Principal Place of Business

7400 STIRLING ROAD STE 1413
HOLLYWOOD FL 33024-0

Mailing Address

7400 STIRLING ROAD STE 1413
HOLLYWOOD FL 33024-0

2. Principal Place of Business

21 1771 SW 83rd Ave
Suite, Apt. #, etc.

28. Mailing Address

26 P.O. Box 4523
Suite, Apt. #, etc.

City & State

23 Miramar, FL

City & State

28 W. Hollywood, FL

Zip

24 33025

Country

25 U.S.A.

Zip

29 33083

Country

30 U.S.A.

9. Name and Address of Current Registered Agent

ROBINSON, WILLIAM H
7400 STIRLING ROAD STE 1413
HOLLYWOOD FL 33024-0

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/26/1995

3a. Date of Last Report

03/28/1996

4. FET Number

65-0644385

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

10. Name and Address of New Registered Agent

81 Name

William H. Robinson

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

1771 SW 83rd Avenue

83

84 City

Miramar

FL

85 Zip Code

33025

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

William H. Robinson / William H. Robinson

9/11/97

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

(Not to be signed Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

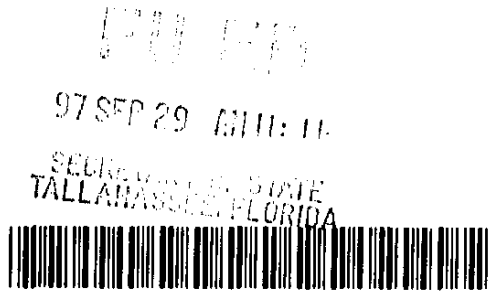
TITLE	P	☐ DELETE
NAME	ROBINSON, WILLIAM	
STREET ADDRESS	7400 STIRLING RD. #1413	
CITY-ST-ZIP	HOLLYWOOD FL 33024	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P	☒ Change ☐ Addition
1.2 NAME	William H. Robinson	
1.3 STREET ADDRESS	1771 SW 83rd Ave	
1.4 CITY-ST-ZIP	Miramar, FL 33025	
2.1 TITLE	700002308700	☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
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 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: William H. Robinson / William H. Robinson 9/11/97 (954) 450-6500



CR2E034 (4/97)