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

97 SEP 29 AM 11:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/26/1995
3a. Date of Last Report: 03/28/1996

2. Principal Place of Business
21 1771 SW 83rd Ave
Suite, Apt. #, etc.
22
City & State
23 Miramar, Fl.
Zip 24 33025
Country 25 U.S.A.

2a. Mailing Address
26 P.O. Box 4523
Suite, Apt. #, etc.
27
City & State
28 W. Hollywood, Fl.
Zip 29 33083
Country 30 U.S.A.

4. FEI Number: 65-0644385 — APPLIED FOR — 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

9. Name and Address of Current Registered Agent
ROBINSON, WILLIAM H
7400 STIRLING ROAD STE 1413
HOLLYWOOD FL 33024- 0

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 title if applicable — (NOTE: Registered Agent 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		
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	700002308871	☐ Change ☐ Addition
2.2 NAME	--10/01/97--01073--011	
2.3 STREET ADDRESS	****550.00 ****550.00	
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)