## 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 # P9600008070 (0)

## FILED Apr 21 1998 8:00am Secretary of State

	ONSULTING, INC.	0) 0100000	,			
Principal Place of Business Mailing Address					ı ınsındğı eld istin diril omlil omlit odlil dölli d	LOLDE LOLLE WOLLD TO DIT O DIT OF OF
12060 S.W. 9			12060 S.W. 99TH STREET			
MIAMI FL 33136		MIAMI FL 33136			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	IO DI NOL
					01/25/1996	
2. Principal F	inclipal Place of Business 2a. Mailing Address				4. FEI Number	Applied For
21 26		26			NOT_APPLICABLE	Not Applicable
Suite, Apt.	Suite, Apt. #, etc.   Suite, Apt. #, etc					\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Žip	Country	Country Zip Co		ry	8. This corporation owes or has paid the o	current year Intangible
24	[25]				Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	ent Registered Agent		al 5.	10. Name and Address of New Registere	d Agent
CERVERA, MIGUEL			•	1 Name		
	060 <b>S.</b> W. 99TH STREET		8	2 Street Add	fress (P.O. Box Number is Not Acceptable)	· · · · · · · · · · · · · · · · · · ·
MIA	AMI FL 33136		8			
			10.	3		
			8	4 City	F	85 Zip Code
11. Pursuant office or r	to the provisions of Sections 607.05 registered agent, or both, in the Starm familiar with, and accept the obli	502 and 607 1508, Florida Stat to of Florida. Such change was gatious of Section 607 0505.	utes, the abo authorized b	ve-named cor by the corpora	poration submits this statement for the purpose ation's board of directors. I hereby accept the a	
SIGNATURE	Signature, typed or protect name of requirement a				uired when reinstating) DATE	
12.		ND DIRECTORS	13.	g	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	PSTD	DELETE	1111111			☐ Change ☐ Addition
NAME	CERVERA, MIGUEL		1.2 NAME			
STREET ADDRESS	12060 S.W. 99TH STREET		1.3 \$1RE	T ADDRESS		
CITY-ST-ZIP	MIAMI FL 33136		1.4 CITY-	ST-ZIP		
TITLE	VP	DELETE	2.1 TITLE			Change Addition
NAME			2.2 NAME			1
STREET ADDRESS	12060 SW 99 ST		2.3 STREE	1 ADDRESS		
CITY-ST-ZIP	MIAMI FL		2.4 CITY	-\$1-ZIP		
TITLE			3 1 TITLE			Change Addition
NAME			3 2 NAME			
STREET ADDRESS			3.3 \$1REE	1 ADDRESS		
CITY-ST-ZIP			3.4. CITY	-ST - ZIP		
TITLE	I		4.1 TO LE			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS				T ADORESS		
CITY-ST-ZIP		DELETE	4.4 CITY-	S1-2IP		
TITLE		DELETE 5.1		1		☐ Change ☐ Addition
NAME CTREET ADDRESS			5.2 NAME			
STREET ADDRESS				1 ADDRESS		
CITY-ST-ZIP TITLE		DELETE	54 CITY-	ST-ZIP	<u> </u>	1 06
		ן_ן נינננונ	6.1 THILE			Change  Addition
NAME CERCET ADDRESS			6.2 NAME			
STREET ADDRESS			- 1	1 ADDRESS		
CITY-ST-ZIP	portify that the information supplied		6.4 C(1Y-	S1-ZIP	0	

14. 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 logal 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.

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