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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000012503 (4)

EMPLOYEE DEVELOPMENT STRATEGIES, INC.

FILED Mar 09 1998 8:00am Secretary of State



<u> </u>					
Principal Place of Business Mailing Address					
421 N.W. 108		821 N.W. 108TH AVENUE			
PLANTATION FL 33324		PLANIATION FL 33324	PLANTATION FL 33324		DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
					02/05/1996
2. Principal F	lace of Business	2s. Mailing Address	2s. Mailing Address		4. FEI Number Applied For
21		26	26		65-0645534 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		S8 75 Additional
22		27]			5. Certificate of Status Desired Fee Required
City & State		City & State	City & State		6. Election Campaign Financing \$5.00 May Be
23		28	· · · · · · · · · · · · · · · · · · ·		Trust Fund Contribution Added to Fees
Zip	Country	Zφ	Country	•	8. This corporation owes or has paid the current year Intangible
24	25 Name and Address	29 3 of Current Registered Agent	100		Personal Property Tax due June 30. Yes No
		or Current Nagistered Agent	81	Name	10. Name and Address of New Registered Agent
	LER, WENDY C			r quarrie	
821 N.W. 108TH AVENUE PLANTATION FL 33324			82	Stree	eet Address (P.O. Box Number is Not Acceptable)
'	411X11011 FL 33324		63		
			84	City	y 85 Zip Code
14 Durament	In the section of Confer	007 0100			FL 12 P COOR
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.					
agent. La	im familiar with, and accept	the obligations of, Section 607.0505, Flori	da Statutes	S.	
SIGNATURE	Streeture toront or realism common of a	regetered agent and little if applicable (NOTE: I	Incidence Acc	nt high atu	ature required when reinstating) DATE
12.		CERS AND DIRECTORS	13.	- Congress	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	DELETE	1.1 TOTLE		Change Addition
NAME	TILLER, WENDY		1.2 NAME		
STREET ADDRESS	821 N.W. 108 AVE.		1.3 STREET	ADDRESS	SS
CITY-ST-ZIP	PLANTATION FL		1.4 CITY - S	T-ZIP	
TITLE		DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		·
STREET ADDRESS			2.3 STREET ADDRESS		22
CITY-ST-ZIP			2.4 CITY-S	T-ZIP	
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3 3 STREET	adoress	ss
CITY-ST-ZIP			3 4. CITY-S	T-ZiP	
TITLE			4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4 3 STREET	address	SS
CITY-ST-ZIP		The Reference	4.4 CITY-ST	r-ZiP	***************************************
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS	i L		5.3 STREET		SS
CITY-ST-ZIP		- Brien	5.4 CITY - ST	1-Z ∤P	
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET		SS
CITY-ST-ZIP			6.4 CITY - S1	· ZIP	

indicated on this annual report or supplied with this tiling 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 suppliemental 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.