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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

## P96000027838 (7) DOCUMENT #

DEVELOPMENT CONSULTANTS & ASSOCIATES, INC.

Principal Place of Business Mailing Address 2065 RIVERLAND RD. 2065 RIVERLAND RD. SUITE 503 FT. LAUDERDALE FL 33312 FT. LAUDERDALE FL 33312 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/29/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0657996 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country This corporation owes or has paid the current year Intangible Yes 24 25 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ECKEL, BRADLEY 2065 RIVERLAND RD. 82 Street Address (P.O. Box Number is Not Acceptable) SUTIE 503 FT. LAUDERDALE FL 33312 83 84 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PSD DELETE Change TITI F 1.1 TITLE ECKEL, BRADLEY NAME 1.2 NAME 2065 RIVERLAND RD. 1.3 STREET ADDRESS STREET ADORESS FT. LAUDERDALE FL 1.4 CITY - ST - ZIP CITY-ST-ZIP ☐ DELETE Change Addition TITLE 2.1 TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 GITY - 5T - ZIP CITY - ST - ZIP DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST-ZIP CITY - ST - ZIP Change Addition DELETE 4.1 TITLE TITLE NAME 4. 2 NAME

6.4 CITY-ST-ZIP CITY-ST-ZIP 14. I 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.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST-ZIP

4.4 CITY - ST - ZIP

5.1 TITLE 5,2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

CITY - ST - ZIP

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

TITLE

NAME STREET ADORESS

REQUIRED

\_\_\_ DELETE

DELETE

CR2E034

Change

Change

Addition

Addition

**FILED** 

Jan 20 1998 8:00am

Secretary of State