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

NAME

STREET ADDRESS

SIGNATURE: ...

CITY-ST-ZIP

FILED Mar 10 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra BaMortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P96000049086 (7) AMERICAN SEARCH CONSULTANTS OF FLORIDA, INC. Principal Place of Business Mailing Address 4732 PEPPER BUSH LANE 4732 PEPPER BUSH LANE **BOYNTON BEACH FL 33436 BOYNTON BEACH FL 33436** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/07/1996 2a. Mailing Address. 2. Principal Place of Business Applied For SAME 26 Not Applicable 21 65-0686006 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 50 6. Election Campaign Financing Added to Fees 23 28 Trust Fund Contribution Zφ Country This corporation owes or has paid the current year Intangible Yes □ No 24 25 29 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 JACOBSON, ALAN **4732 PEPPER BUSH LANE** Street Address (P.O. Box Number is Not Acceptable) **BOYNTON BEACH FL 33436** 63 84 City Zip Code 11. Pursuant to the provisions of Sections 607.050? 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, and familiar with, and processing the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE **

SIGNATURE ** Alan Jacosson Pearlown/ DIRELTOR SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Addition Change DELETE 1.1 TITLE 1.2 NAME CRZEG34 NAME JACOBSON, ALAN 4732 PEPPER BUSH LANE 1.3 STREET ADDRESS STREET ADDRESS **BOYNTON BEACH FL 33436** CITY-ST-ZIP 1.4 CITY - ST - ZIP Addition DELETE L] Change 21 TITLE TITLE 22 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE 32 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-SY-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Change Addition DELETE TITLE 5.1 TITLE NAME 52 NAME 5 3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CFTY-ST-ZIP Addition TITLE DELETE 6.1 TITLE Change

> 6.2 NAME 6.3 STREET ADDRESS

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 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 recover or trustee exprowere) 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 attachmous with an address.

SIGNATURE:

6.4 City-ST-ZiP

X 2/26/98 X 56/733-807V