FILE !

. FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

FLORIDA DEPARTMENT OF STATE

FILED

Apr 25 1997 8:00am

Secretary of State

Sandra B. Mortham 🕆

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000061470 (6)

INNOVATIVE BUSINESS CONSULTANTS INC.

Principal Piace of Business Mailing Address 20429 NE 10TH COURT 20429 NE 10TH COURT NO MIAMI BEACH FL 33179-2517 NO MIAMI BEACH FL 33179 3. Date Incorporated or Qualified Date of Last Report 07/22/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 0684276 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 **Trust Fund Contribution** П Added to Fees 28 Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Country Yes No 24 25 29 30 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 ANANTHARAMAN, SARASWATHI 20429 NE 10TH COURT 82 Street Address (P.O. Box Number is Not Acceptable) NO MIAMI BEACH FL 33179 83 84 City Zip Code 85 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 farty air with, and accept the obligations of, Section 607.0505, Florida Statutes. (NOTE: Registered Agent signature required when reinstating) e of registered age ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS (96/6) 12 13. DELETE Change Addition SELPETARY 1.1 TITLE THE! STRASWATH AWANTERRAMAN 1.2 NAME NAME 20429 NE LOCA 1.3 STREET ADDRESS STREET ADDRESS **33 (37** Nimiam BRACU TC 1.4 CITY-ST-ZIP CIPY - S1 - ZIP Change Addition PRESIDENT THUE 2.1 TITLE RADUA VALTHESWARAN 2.2 NAME 7700 CW 13651 33156 2.3 STREET ADDRESS STREET ADDRESS 2 4 CITY-ST-ZIP CHY-ST ZIP VILE PRESIDENT Change Addition THE DELETE 31 TITLE MEENAKSHY KRIFHMAN NAME 32 NAME DAVIE, PLESO PLAD STREET ADDRESS 3.3 STREET ADDRESS DAVLE COY ST-769 34. CITY-ST-ZIP Addition DELETE 4.1 TITLE Tille 4. 2 NAME NAMI 4.3 STREET ADDRESS STHEE! ACDRESS $CHY \cdot S^{T} \cdot ZP$ 4.4 CITY - ST - ZIP DELETE Change ___ Addition 5.1 TITLE THE NAME 5.2 NAME **53 STREET ADDRESS** STREET ADDRESS 5.4 CITY-ST-ZIP CHY-SI-ZIP Change TITLE DELETE 61 TILE Addition 62 NAME NAME STREET ADDRESS 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