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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra R. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

FILED Apr 11 1997 8:00am Secretary of State

DOCUMENT # P9600065370 (4) 1. Corporation Name PLANNING AND BUSINESS DEVELOPMENT CONSULTANTS, I NC. Principal Place of Business Mailing Address 3200 PONCE DE LEON BOULEVARD CORAL GABLES FL 33134 CORAL GABLES FL 33134											
OOTAL CAPLL	0 12 00:04		40.412				3. Date Incorpora	heifiled or hele	de D	ate of Last R	enort
							08/05/1996) Ja. D.	200 01 2000 11	opon
2. Principal Pl	ace of Busine	SS	2a. Ma 26	iling Address			4. FEI Number	+PPLIED	FOR	AF NO	oplied For ot Applicable
	Suite, Apt #, etc.		Sui	Suite, Apt. #, etc.			5. Certificate of Status Desired			\$8.75	
City & State	City & State			City & State			6. Election Campaign Financing Trust Fund Contribution				DO May Be ed to Fees
23 Ζιρ	7	Country	Zip		Country	<i>y</i>	8. This corporate	on has liability for	intangible	tax under s	
24		snd Address of Cui	29 rrent Registere	d Agent	[30]		10. Name and Ad				
HEIN				<u> </u>	81	Name			.5		
HEINERT, CARLOS GUSTAVO 3200 PONCE DE LEON BOULEVARD CORAL GABLES FL 33134			ARD			Street Add	Address (P.O. Box Number is Not Acceptable)				
COH	AL GABLES	FL 33134			63		· 				
					Ĺ					85 Zip	Code
					84	City				11	
11. Pursuant I	to the provision	ins of Sections 607.	0502 and 607.1	508, Florida Statu	- ({ `	poration submits this	statement for the	FL purpose o	. [[ts registered
SIGNATURE					ites, the above authorized by lorida Statutes	e-named corp y the corpora s.	poration submits this station's board of directo	statement for the ors. I hereby acce		. [[ts registered registered
SIGNATURE		printed name of registates		nlicable. (NC	ites, the above authorized by lorida Statutes	e-named corp y the corpora s.	ired when reinstating)	statement for the ors. I hereby acce	purpose o ept the apr	f changing li pointment as	······································
SIGNATURE	Signer on type do	printed name of registers OFFICERS	d agent and title if app AND DIRECTOR	nlicable. (NC	ites, the above authorized by lorida Statute:	e-named corp y the corpora s.	ired when reinstating)		purpose o ept the apr	f changing li pointment as	······································
SIGNATURE	D HEINERT,	OFFICERS CARLOS GUSTA	d agent and title if epp AND DIRECTOR	nhoable. (NO	utes, the above authorized by lorida Statute: OTE Registered Agr	e-named corp y the corpora s.	ired when reinstating)		purpose o ept the apr	f changing in pointment as	RS IN 12
SIGNATURE 12. THE NAME STREET ADDRESS	D HEINERT, 3200 PON	OFFICERS CARLOS GUSTA CE DE LEON BO	d agent and title if epp AND DIRECTOR	nhoable. (NO	utes, the above authorized by florida Statute. TE Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET	re-named corpy the corporal s.	ired when reinstating)		purpose o ept the apr	f changing in pointment as	RS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY- ST-ZIP	D HEINERT, 3200 PON	OFFICERS CARLOS GUSTA	d agent and title if epp AND DIRECTOR	olicable (NC RS DELETE	utes, the above authorized by florida Statute. TE Registered Ag. 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-5	re-named corpy the corporal s.	ired when reinstating)		purpose o ept the apr	f changing lipointment as	RS IN 12
SIGNATURE 12. THE NAME STREET ADDRESS CITY-ST-ZIP THEE	D HEINERT, 3200 PON	OFFICERS CARLOS GUSTA CE DE LEON BO	d agent and title if epp AND DIRECTOR	nhoable. (NO	utes, the above authorized by authorized by lorida Statute: 13. 11 Tiffle 1.2 NAME 1.3 STREE! 1.4 CITY-5 2.1 Tiffle	re-named corpy the corporal s.	ired when reinstating)		purpose o ept the apr	f changing in pointment as	RS IN 12
SIGNATURE 12. THE NAME STREET ADDRESS CITY-ST-ZIP THE NAME	D HEINERT, 3200 PON	OFFICERS CARLOS GUSTA CE DE LEON BO	d agent and title if epp AND DIRECTOR	olicable (NC RS DELETE	utes, the above authorized by authorized by lorida Statute: 13. 11 Tiffle 1.2 NAME 1.3 STREE! 1.4 CITY-5 2.1 TIFFLE 22 NAME	re-named corpy the corporal s. ent signature required to the corporal s. If ADDRESS ST-ZIP	ired when reinstating)		purpose o ept the apr	f changing lipointment as	RS IN 12
SIGNATURE 12. TIFLE NAME STREET ADDRESS CITY-ST-ZIP TIFLE NAME STREET ADDRESS	D HEINERT, 3200 PON	OFFICERS CARLOS GUSTA CE DE LEON BO	d agent and title if epp AND DIRECTOR	olicable (NC RS DELETE	utes, the above authorized by authorized by lorida Statute: 13. 11 Tiffle 1.2 NAME 1.3 STREE! 1.4 CITY-5 2.1 TIFFLE 22 NAME	e-named corp y the corpora s. If ADDRESS T ADDRESS	ired when reinstating)		purpose o ept the apr	f changing lipointment as	RS IN 12
SIGNATURE 12. THE NAME STREET ADDRESS CITY-ST-ZIP THE NAME	D HEINERT, 3200 PON	OFFICERS CARLOS GUSTA CE DE LEON BO	d agent and title if epp AND DIRECTOR	olicable (NC RS DELETE	utes, the above authorized by authorized by lorida Statute: 13. 11 Tifle 1.2 NAME 1.3 STREE! 1.4 CITY-S 2.1 TIFLE 2.2 NAME 2.3 STREE!	e-named corp y the corpora s. If ADDRESS T ADDRESS	ired when reinstating)		purpose o ept the apr	f changing lipointment as	RS IN 12
SIGNATURE 12. THE NAME STREET ADDRESS CITY-ST-ZIP THE NAME STREET ADDRESS CITY-SL-ZIP	D HEINERT, 3200 PON	OFFICERS CARLOS GUSTA CE DE LEON BO	d agent and title if epp AND DIRECTOR	Incable (NC RS DELETE	utes, the above authorized by authorized by lorida Statute: 13. 11 Tifle 12 NAME 13 STREE! 14 CITY-5 21 Tifle 22 NAME 23 STREE! 24 CiTY-	e-named corp y the corpora s. If ADDRESS T ADDRESS	ired when reinstating)		purpose o ept the apr	f changing lipointment as D DIRECTOR Change	RS IN 12 Addition Addition
SIGNATURE 12. HILL NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-SL-ZIP TITLE	D HEINERT, 3200 PON	OFFICERS CARLOS GUSTA CE DE LEON BO	d agent and title if epp AND DIRECTOR	Incable (NC RS DELETE	utes, the above authorized by lorida Statute: 13. 11 THLE 12 NAME 13 STREE! 14 CITY-S 21 THLE 22 NAME 23 STREE! 24 CITY-S 31 THLE 32 NAME	e-named corp y the corpora s. If ADDRESS T ADDRESS	ired when reinstating)		purpose o ept the apr	f changing lipointment as D DIRECTOR Change	RS IN 12 Addition Addition
SIGNATURE 12. HILE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP	D HEINERT, 3200 PON	OFFICERS CARLOS GUSTA CE DE LEON BO	d agent and title if epp AND DIRECTOR	DELETE DELETE DELETE	tes, the above authorized by lorida Statute: 13. 11.Title 1.2 NAME 1.3 STREE! 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREE: 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE: 3.4 CITY- 3.4 CITY- 3.4 CITY- 3.4 CITY- 3.5 TREE: 3.5 TREE: 3.7 TITLE 3.7 NAME 3.7 STREE: 3.7 TITLE 3.7 NAME 3.7 STREE: 3.7 CITY-	e-named corp y the corpora s. If ADDRESS ST-ZIP If ADDRESS ST-ZIP If ADDRESS T ADDRESS	ired when reinstating)		purpose o ept the apr	f changing is pointment as D DIRECTOF Change Change	Addition Addition
SIGNATURE 12. THE NAME STREET ADDRESS CITY-ST-ZIP THEE NAME STREET ADDRESS CITY-ST-ZIP THEE NAME STREET ADDRESS CITY-ST-ZIP THEE	D HEINERT, 3200 PON	OFFICERS CARLOS GUSTA CE DE LEON BO	d agent and title if epp AND DIRECTOR	Incable (NC RS DELETE	tes, the above authorized by lorida Statute: 13. 11 TITLE 1.2 NAME 1.3 STREE: 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREE: 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE: 3.4 CITY- 4.1 TITLE	e-named corp y the corpora s. If ADDRESS ST-ZIP If ADDRESS ST-ZIP If ADDRESS ST-ZIP If ADDRESS ST-ZIP	ired when reinstating)		purpose o ept the apr	f changing lipointment as D DIRECTOR Change	RS IN 12 Addition Addition
SIGNATURE 12. THE NAME STREET ADDRESS CITY- ST- ZIP THE NAME STREET ADDRESS CITY- SI- ZIP THE NAME STREET ADDRESS CITY- SI- ZIP THE NAME STREET ADDRESS CITY- SI- ZIP THE NAME	D HEINERT, 3200 PON	OFFICERS CARLOS GUSTA CE DE LEON BO	d agent and title if epp AND DIRECTOR	DELETE DELETE DELETE	tes, the above authorized by lorida Statute: 13. 11 Title 12 NAME 13 STREE! 14 CITY- 21 TITLE 22 NAME 23 STREE! 24 CITY- 31 TITLE 32 NAME 33 STREE 34 CITY- 41 TITLE 4. 2 NAME	e-named corp y the corpora s. Friday and the signature requires Friday and the signa	ired when reinstating)		purpose o ept the apr	f changing is pointment as D DIRECTOF Change Change	Addition Addition
SIGNATURE 12. TIFLE NAME STREET ADDRESS CITY-ST-ZIP TIFLE NAME STREET ADDRESS	D HEINERT, 3200 PON	OFFICERS CARLOS GUSTA CE DE LEON BO	d agent and title if epp AND DIRECTOR	DELETE DELETE DELETE	tes, the above authorized by lorida Statute: 13. 11 Title 12 NAME 13 STREE! 14 CITY- 21 TITLE 22 NAME 23 STREE! 24 CITY- 31 TITLE 32 NAME 33 STREE: 34 CITY- 41 TITLE 4 2 NAME 43 STREE!	e-named corp y the corpora s. r ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP	ired when reinstating)		purpose o ept the apr	f changing is pointment as D DIRECTOF Change Change	Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D HEINERT, 3200 PON	OFFICERS CARLOS GUSTA CE DE LEON BO	d agent and title if epp AND DIRECTOR	DELETE DELETE DELETE	tes, the above authorized by lorida Statute: 13. 11 Title 12 NAME 13 STREE! 14 CITY- 21 TITLE 22 NAME 23 STREE! 24 CITY- 31 TITLE 32 NAME 33 STREE 34 CITY- 41 TITLE 4. 2 NAME	e-named corp y the corpora s. r ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP	ired when reinstating)		purpose o ept the apr	f changing is pointment as D DIRECTOF Change Change	Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HEINERT, 3200 PON	OFFICERS CARLOS GUSTA CE DE LEON BO	d agent and title if epp AND DIRECTOR	DELETE DELETE DELETE DELETE	tes, the above authorized by lorida Statute: 13. 11 Title 12 NAME 13 STREE! 14 CITY- 21 TITLE 22 NAME 23 STREE! 24 CITY- 31 TITLE 32 NAME 33 STREE 34 CITY- 41 TITLE 4 2 NAME 43 STREE! 4 CITY-	e-named corp y the corpora s. ent signature requ I ADDRESS ST-ZIP	ired when reinstating)		purpose o ept the apr	f changing in pointment as DIRECTOR Change Change Change	Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE	D HEINERT, 3200 PON	OFFICERS CARLOS GUSTA CE DE LEON BO	d agent and title if epp AND DIRECTOR	DELETE DELETE DELETE DELETE	tes, the above authorized by authorized by lorida Statute: 13. 11 Title 12 NAME 13 STREE! 14 CITY-5 21 TITLE 22 NAME 23 STREE! 32 NAME 33 STREE: 34 CITY-41 TITLE 4. 2 NAME 4.3 STREE! 4.4 CITY-5 5.1 TITLE 5.2 NAME	e-named corp y the corpora s. ent signature requ I ADDRESS ST-ZIP	ired when reinstating)		purpose o ept the apr	f changing in pointment as DIRECTOR Change Change Change	Addition Addition Addition
SIGNATURE 12. TIFLE NAME STREET ADDRESS CITY-ST-ZIP TIFLE NAME	D HEINERT, 3200 PON	OFFICERS CARLOS GUSTA CE DE LEON BO	d agent and title if epp AND DIRECTOR	DELETE DELETE DELETE DELETE	tes, the above authorized by authorized by lorida Statute: 13. 11 Title 12 NAME 13 STREE! 14 CITY-5 21 TITLE 22 NAME 23 STREE! 32 NAME 33 STREE: 34 CITY-41 TITLE 4. 2 NAME 4.3 STREE! 4.4 CITY-5 5.1 TITLE 5.2 NAME	e-named corp y the corpora s ent agnature requ I ADDRESS ST-ZIP	ired when reinstating)		purpose o ept the apr	f changing in pointment as DIRECTOR Change Change Change	Addition Addition Addition
SIGNATURE 12. TIFLE NAME STREET ADDRESS CITY-ST-ZIP TIFLE NAME STREET ADDRESS	D HEINERT, 3200 PON	OFFICERS CARLOS GUSTA CE DE LEON BO	d agent and title if epp AND DIRECTOR	DELETE DELETE DELETE DELETE	Ites, the above authorized by lorida Statute: 13. 11 TITLE 1.2 NAME 1.3 STREE! 1.4 CITY-5 2.1 TITLE 22 NAME 23 STREE: 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE: 4.2 NAME 4.3 STREE: 4.1 TITLE 4.2 NAME 4.3 STREE: 4.1 TITLE 5.2 NAME 5.3 STREE: 5.	e-named corp y the corpora s ent agnature requ I ADDRESS ST-ZIP	ired when reinstating)		purpose o ept the apr	f changing in pointment as DIRECTOR Change Change Change	Addition Addition Addition
SIGNATURE 12. THE NAME STREET ADDRESS CITY-ST-ZIP	D HEINERT, 3200 PON	OFFICERS CARLOS GUSTA CE DE LEON BO	d agent and title if epp AND DIRECTOR	DELETE DELETE DELETE DELETE DELETE	tes, the above authorized by lorida Statute: 13. 11 Title 12 NAME 13 STREE! 14 CITY-5 21 TITLE 22 NAME 23 STREE! 32 NAME 33 STREE! 34 CITY-41 TITLE 4.2 NAME 4.3 STREE! 4.4 CITY-51 TITLE 5.2 NAME 5.3 STREE! 5.4 CITY-51 TITLE 5.2 NAME 5.3 STREE! 5.4 CITY-51 TITLE 5.2 NAME 5.3 STREE! 5.4 CITY-51 TITLE 5.5 NAME 5.5 STREE! 5.4 CITY-51 TITLE 5.5 NAME 5.5 STREE! 5.4 CITY-51 TITLE 5.5 NAME 5.5 STREE! 5.6 CITY-51 TITLE 5.7 NAME 5.7 STREE! 5.7 STREE! 5.8 STREE! 5.8 STREE! 5.8 STREE! 5.9	e-named corp y the corpora s ent agnature requ I ADDRESS ST-ZIP	ired when reinstating)		purpose o ept the apr	f changing in pointment as DIRECTOR Change Change Change	Addition Addition Addition Addition
SIGNATURE 12. THE NAME STREET ADDRESS CITY-ST-ZIP THE	D HEINERT, 3200 PON	OFFICERS CARLOS GUSTA CE DE LEON BO	d agent and title if epp AND DIRECTOR	DELETE DELETE DELETE DELETE DELETE	Ites, the above authorized by authorized by lorida Statute: 13. 11 Title 1.2 NAME 1.3 STREE! 1.4 CITY-5 2.1 TITLE 22 NAME 23 STREE: 2.4 CITY-3.1 TITLE 3.2 NAME 33 STREE: 3.4 CITY-4.1 TITLE 4.2 NAME 4.3 STREE: 4.4 CITY-5 5.1 TITLE 5.2 NAME 5.3 STREE: 5.4 CITY-6.1 TITLE 6.2 NAME 6.1 TITLE 6.2 NAME	e-named corp y the corpora s ent agnature requ I ADDRESS ST-ZIP	ired when reinstating)		purpose o ept the apr	f changing in pointment as DIRECTOR Change Change Change	Addition Addition Addition Addition

SIGNATURE: