

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

APPROVED AND FILED *pg. 2072*

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

97 SEP 17 PM 3:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # *P96000065398*
1. Corporation Name
LEGAL SOLUTIONS, INC.

Principal Place of Business Mailing Address
*1515 S. FLAGLER DRIVE, P.H. #1
WEST PALM BEACH, FL 33407*

2. Principal Place of Business	2a. Mailing Address
21 <i>5200 POINSETTIA AVE</i>	26 <i>5200 POINSETTIA AVE</i>
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 <i>STE 402</i>	27 <i>STE 402</i>
City & State	City & State
23 <i>WEST PALM BEACH, FL</i>	28 <i>WEST PALM BEACH, FL</i>
Zip	Zip
Country	Country
24 <i>33407</i>	29 <i>33407</i>
25 <i>PALM BEACH</i>	30 <i>PALM BEACH</i>

3. Date Incorporated or Qualified <i>AUGUST 5 1996</i>	3a. Date of Last Report
4. FEI Number <i>65-0721703</i>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
*SCOT HANLEY
5200 POINSETTIA AVE #402
WEST PALM BEACH, FL 33407*

10. Name and Address of New Registered Agent

81 Name <i>SCOT HANLEY</i>
82 Street Address (P.O. Box Number is Not Acceptable) <i>5200 POINSETTIA AVE STE 402</i>
83
84 City <i>WEST PALM BEACH</i>
85 Zip Code <i>FL 33407</i>

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 *SCOT E. HANLEY PRESIDENT 9/15/97*
Signature, typed or printed name of registered agent as applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	<i>PREMIER</i>	<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<i>SCOT E. HANLEY P/5171C</i>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	<i>SCOT E. HANLEY</i>	
1.3 STREET ADDRESS	<i>5200 POINSETTIA AVE #402</i>	
1.4 CITY-ST-ZIP	<i>WEST PALM BEACH, FL 33407</i>	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

*800002298298-3
-09/19/97--01089--007
***165.00 ***165.00*

*A. Oline
9/17/97*

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

SIGNATURE: *SCOT E. HANLEY* 9/15/97 (561) 882-7498
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)

pg. 2 of 2

LEGAL SOLUTIONS, INC.
5200 Poinsettia Ave, Ste. 402
West Palm Beach, FL 33407
(561) 882-9498

VIA CERTIFIED MAIL - RRR

Annual Reports Filings
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: LEGAL SOLUTIONS, INC.
P96000065398

Gentlemen/Ladies:

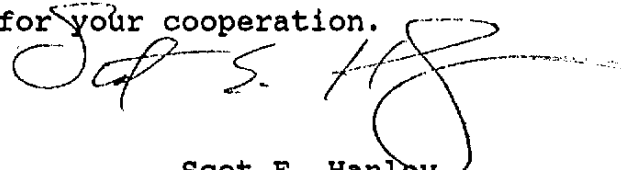
Enclosed please find a check in the amount of \$165.00 as the Filing Fee for the 1997 Annual Report.

This report and fee would have been filed earlier if we had received notification of the necessity of filing same from your office; none of which was ever received by us.

This is possibly due to a change of address location in December 1996; although the proper change of address for mail forwarding was filed with the U.S. Post Office, and notice of same was also mailed to you.

Please accept the enclosed fee and Annual Report and waive the late fee due to our desire to have complied with the filing date if we had received notice of same. We had no idea an Annual Report would be required prior to the completion of a full year as a corporation, but we would have gladly filed same if we had known.

Thank you for your cooperation.



Scot E. Hanley
President

Encl.

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