

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

FILED
May 08 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000067605
1. Corporation Name
BUSINESS DEVELOPMENT CONSULTING GROUP, Inc

Principal Place of Business Mailing Address

2. Principal Place of Business 21 P.O. BOX 402722 Suite, Apt. #, etc. 22 City & State 23 MIAMI BEACH, FLORIDA Zip Country 24 33140 25		2a. Mailing Address 26 P.O. BOX 402722 Suite, Apt. #, etc. 27 City & State 28 MIAMI BEACH, FLORIDA Zip Country 29 33140 30		3. Date Incorporated or Qualified AUG 14, 1996	3a. Date of Last Report
				4. FEI Number 65-0690791	Applied For 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

NARDIN PAOLO
8816 COLLINS AV. #106
SURFSIDE, FL 33154

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 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 NARDIN PAOLO DATE 04/03/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	11 TITLE	12 NAME
D	NARDIN PAOLO		
8816 COLLINS AV. #106		13 STREET ADDRESS	
SURFSIDE, FL 33154		14 CITY-ST-ZIP	
TITLE	NAME	21 TITLE	22 NAME
D	HUERTAS VICTORIA		
8816 COLLINS AV. #106		23 STREET ADDRESS	
SURFSIDE, FL 33154		24 CITY-ST-ZIP	
TITLE	NAME	31 TITLE	32 NAME
TITLE	NAME	41 TITLE	42 NAME
TITLE	NAME	51 TITLE	52 NAME
TITLE	NAME	61 TITLE	62 NAME

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 an address.

SIGNATURE: NARDIN PAOLO DATE 04/03/97 (305) 861-5831