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

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P96000075092**1. Corporation Name

FLETCHER CONSULTING, INC.

Principal Place of Business

Mailing Address

## **FILED** Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90041 023 \*\*\*150.00



11214 PINES BO PEMBROKE PINI	Dulevard. Suite 240 Es Fl 33026	11214 PINES BOULEVARD. S PEMBROKE PINES FL 33026	SUITE 240	DO NOT WRITE IN TH  3. Date Incorporated or Qualifed	IIS SPACE		Ì
-				09/10/1996		" I F	l
	ace of Business	2a. Mailing Address	0	4. FEI Number		olied For	
	PINES BOULEVARD	26 //2/14 PINES Suite, Apt. #, etc.	BOULEVARD	65-0701109		Applicable	'
Suite, Apt. 1		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 A Fee Rec		مرخ نے
City & State  City & State  City & State  23 PEMBROKE PINES FL 28 PEMBROKE			PINES	6. Election Campaign Financing Trust Fund Contribution	\$5.00 to Added to		
Zip	Country	Zip	Country	8. This corporation owes the current year	Intangible		
330.	26 25 USA	29 33026 3	10 USA	Personal Property Tax.		□No	
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Register	d Agent		
1221	CHER, ROY 4 PINES BLVD. STE 240 BROKE PINES FL 33026		82 Street Addr	ess (P.O. Box Number is Not Acceptable)		-	
			84 City 12 Em G			ode 3 0 2 5	
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 Amiliar with, and accept the obligations of, Section 607.0505, Florida Statutes							
SIGNATURE	1200 mm	HER !	Kont VII	_ 4/=	Lc/99		
SIGNATURE	Signature, typed or printed name of registered agent		Registered Agent signature require				ļ á
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS			(11/98
TITLE	PSTD	☐ DELETE	1.1 TITLE		Change	☐ Addition	ξ.
NAME	FLETCHER, ROY M		1.2 NAME				5
STREET ADDRESS	11214 PINES BOULEVARD, SUIT	E 240	1.3 STREET ADDRESS				32F034
CITY-ST-ZIP	PEMBROKE PINES FL 33026		1.4 CITY-ST-ZIP				8
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NAME I			2.2 NAME	·			}
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i i	•		3.4. CITY-ST-ZIP				
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NAME			6.2 NAME				1
STREET ADDRESS		•	6.3 STREET ADDRESS				
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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 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, with all other like empowered.