

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

PROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONSFILED
Jun 04 1997 8:00am
Secretary of State

DOCUMENT # P98000078608 (2)

Corporation Name
WALL STREET COMPLETE, INC.

Principal Place of Business

100 RIALTO PLACE, SUITE 530
MELBOURNE FL 32901

Mailing Address

100 RIALTO PLACE, SUITE 530
MELBOURNE FL 32901-3074

Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

2a. Mailing Address

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Suite, Apt. #, etc.

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City & State

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Zip

Country

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9. Name and Address of Current Registered Agent

STEWART, KRISTINE H
100 RIALTO PLACE, SUITE 530
MELBOURNE FL 32901

3. Date Incorporated or Qualified

09/20/1998

3a. Date of Last Report

4. FL Number

57-3401358

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees7. This corporation has liability for unexpired tax under s. 199.032
Florida Statutes

Yes

No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

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84 City

FL

85 Zip Code

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.

NATIVE

Signature, name in printed form of registered agent and title if applicable

(NOTE: Registered Agent signature required when registering)

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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D
STEWART, KRISTINE H
100 RIALTO PLACE, SUITE 530
MELBOURNE FL 32901

DELETE

DELETE

DELETE

DELETE

DELETE

DELETE

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY ST ZIP

2.1 TITLE

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

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY ST ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY ST ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY ST ZIP

7.1 TITLE

7.2 NAME

7.3 STREET ADDRESS

7.4 CITY ST ZIP

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

400002208704
-06/11/97-01052-037
***165.00

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF CURRENT OFFICER OR DIRECTOR

Date

Desktop Phone #