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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 22 1998 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

NAME STREET ADDRESS P96000102224 (8)

GREENMAN CONUSULTING GROUP, INC.

0			- 4,			
l '	ce of Business	Mailing Address				
100 N BISCAYNE BLVD 30TH FLOOR 100 N BISCAYNE BLVD MIAMI FL 33132			30TH FLOOR	DO NOT WRITE	IN THIS SPACE	
1				3. Date Incorporated or Qualified		
				12/18/1996		
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		65-0733097	Not Applicable	
Suite, Apt	#, etc	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stat	re	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25	Ζ)ρ <b>29</b>	Country 30	This corporation owes or has pa Personal Property Tax due June		
	9, Name and Address of Curre	ent Registered Agent		10. Name and Address of New Re		
HE	YDASCH, AXEL		81 Name			
100 N BISCAYNE BLVD 30TH FLOOR MIAMI FL 33132			82 Street Add	Street Address (P.O. Box Number is Not Acceptable)		
miz	1MI I L 33 132		83			
			B4 City		85 Zip Code	
				poration submits this statement for the p	- PL     '	
SIGNATURE	Signature, typed or jointed name of regulered a	gent and little if applicable (NO	lorida Statutes.  It. Registored Agent a gnature requi	tion's board of directors. I hereby acceptions board of directors. I hereby acceptions are when reinstating)	DATE	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC		
TITLE	PSD	DELETE	1.1 TITLE		Change Addition	
NAME	KOPF, MAXIMILIAN		1.2 NAME			
STREET ADDRESS	100 N BISCAYNE BLVD STE	3000	1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33132	T propert	1.4 CITY - ST - ZIP			
TITLE		☐ DELETE	2.1 TITLE		☐ Change ☐ Addition	
NAME			2 2 NAME			
STREET ADDRESS			2 3 STREET ADDRESS			
CITY-ST-7IP		DELETE	2 4 CITY-ST-ZIP		Change Addition	
NAME			3 1 TITLE 3 2 NAME		☐ Change ☐ Addition	
STREET ADDRESS						
City-St-7iP			3 3 STREET ADDRESS			
TITLE		DELETE	3.4. CITY-ST-ZIP 4.1.7ITLE		Change Addition	
NAME		LJ VICCIE	4. 2 NAME		El cuarde El Vodition	
STREET ADDRESS			4.2 NAME 4.3 STREET ADDRESS			
CITY-ST-ZIP			· ·			
TITLE	<del></del>	DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition	
NAME			5.1 HILE 5.2 NAME		C. Change C. Modition	
STREET ADDRESS		·			İ	
CITY-ST-ZIP			5.3 STREET ADDRESS			
TITLE		DETETE	5.4 CITY-ST-ZIP		Change Addition	

14. Thereby 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 supplier mind around 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 focusing in 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 charling or on an attriction in the control of the corporation of the corpora