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

PROFIT CORPORATION ANNUAL REPORT

1997

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

Jun 16 1997 8:00am

Secretary of State

Change

Addition

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P96000103556 (2)

THE WORKING GROUP, INC.

Principal Place of Business Mailing Address 400 N. STATE ROAD 7 SUITE 310 400 N. STATE ROAD 7 SUITE 310 MARGATE FL 33063 MARGATE FL 33063-4561 3. Date Incorporated or Qualified 3a. Date of Last Report 12/20/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name LANE, HAROLD 400 N. STATE ROAD 7 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 310** 83 MARGATE FL 33063 City 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** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) DELETE TITLE 1.1 TITLE Change Addition KURDIAN, GREGORY NAME 1.2 NAME 22E034 1261 RIVER REACH DR. STREET ADDRESS 1.3 STREET ADDRESS FT LAUDERDALE FL 33315 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 213016 SCARBERRY, DALE NAME 2.2 NAME 1205 N.E. 13TH AVE. STREET ADDRESS 2.3 STREET ADDRESS FT LAUDERDALE FL 33304 CITY-ST-7/F 2.4 C(1Y+S1-Z)P DELETE Change TITLE 3.1 TITLE ☐ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 41 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 C(TY - ST - Z)P DELFTE Change Addition TITLE 5.1 THLE

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 (j.phanged, or on an attachment with an address.

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

5.3 STREET ADDRESS

6.3 STREET ADDRESS

64 CITY-ST-7/P

5.4 CITY - ST - ZIP

Bax No. P. P. A. 1 . 22 1907 PRINKE 900