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

PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

May 08 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000014337 (4)

AMK CONSULTING GROUP, INC.

Principal Place of Business Mailing Address				T SOURCED THE TORKS TORKS TORKS ONLY BEING BOTH BY ALL BY ALL BY CAN THINK TORK TORK		
201 NORTH FRANKLIN STREET #2201 TAMPA FL 33602		201 NORTH FRANKLIN STREET #2201 TAMPA FL 33602				DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
2 Princinal P	lace of Business	2a, Mailing A	ddress			02/10/1997 4. FEI Number Applied For
21	add of Basilloss	<u> </u>	26			59-3433683 Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.			SR 75 Additional
22		27	27			5. Certificate of Status Desired Fee Required
City & State		City & St	City & State			Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country Zip			_ Country		8. This corporation owes or has paid the current year Intangible
24	25 29 30		30		Personal Property Tax due June 30. Yes No	
	g. Name and Address of Curre	nt Registered Age	nt	B1	Name	10. Name and Address of New Registered Agent
	WARDS, JOSEPH D			61	Name	
201 NORTH FRANKLIN STREET #2100			82	Street	Address (P.O. Box Number is Not Acceptable)	
TAN	MPA FL 33602					
				83		
				84	City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508. F	lorida Statutes	s. the above	a-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.						
ľ	in the man with and accept the early	ganons or, occion o	100,000	iod Otatates		
SIGNATURE	Signature, typed or printed name of regulated ag	ent and title if applicable	(NOTE:	Registered Age	nt signature	required when reinstating) DAYE
12. OF FICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	L_J DELETE		DELETE	**********		C, D Change & Addition
NAME	ET ADDRESS Frederick Bollarl					Frederick B. Karl
STREET ADDRESS	Sciences 1	siftent		1.3 STREFT	ADDRESS	201 N. Franklin St., Suite 2201
CITY-ST-ZIP				1.4 CITY-S	T-ZIP	Tampa, FL 33602
TITLE	L_I DELETE				P,D Change K Addition	
NAME				2.2 NAME		Peter D. Klingman
STREET ADDRESS				2.3 STREET	ADDRESS	201 N, Franklin St., Suite 2100
CITY-ST-ZIP			DELETE	2. 4 City - 9	ST-ZIP	Tampa, FL 33602 Change & Addition
TITLE		L] DELETE	3.1 TITLE		- · k -
NAME				3.2 NAME	+000500	Enola T. 3rown
STREET ADDRESS				3.3 STREET		201 N. Franklin St., Suite 2100
CITY-ST-ZIP TITLE			DELETE	3.4. CITY - S 4.1 TITLE	1 - ZIP	Tampa, FL 33602 Change X Addition
NAME		L.,	JOLLEIL	4.2 NAME		D
					2230004	Preston O. Cockey, Jr.
STREET ADDRESS				4.3 STREET		201 N. Franklin St., Suite 2100
CITY-ST-ZIP TITLE			DELETE	5.1 TITLE	I - CIT	Tampa, FL 33602 Change XX Addition
NAME		<u></u>		5.2 NAME		D Arthur D
STREET ADDRESS				5.3 STREET	ADDRESS	(-
CITY-ST-ZIP				5.4 CITY - S		Stephen J. Szabo, III
TITLE			DELETE	6.1 TITLE	. 4.11	201 N. Franklin St., Suite 2100 Addition
NAME		_	•	6.2 NAME	İ	Tampa, FL 33601
STREET ADDRESS				6.3 STREET	ADDRESS	

6.4 CITY - ST-ZIP

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 trusted 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.