SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

AMOUNT DUE ON OR BEFORE 09/30/88: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000014360 (6)

BRYAN ASHLEY CONSULTING, INC.

FILED Sep 16 1998 8:00am Secretary of State



8-4-98

5300 N POWER FT LAUDERDAL		5300 N POWERLINE ROAD FT LAUDERDALE FL 33309		DO NOT WRITE IN THE PRACE	
	Willing	address		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/11/1997	
2. Principal Pi 21 Suite, Apt 22 City & State	ace of Business 2601 Gatewa MANAGED TO THE STATE OF THE S	26 A Mailing Address 26 A C C C C C C C C C C C C C C C C C C	eway Dri	4. FSI Number EIN Applied For	le
23 Vo√	npano Black fl	28 fumpagno	Black fl	Trust Fund Contribution Added to Fees	
24 33	069 25 USA	29 33069 30	m likr∧	8. This corporation owes or has paid the current year Intangible Personal Properly Tax due June 30. Yes No 10. Name and Address of New Registered Agent	
ISACKSON, JERRY 5300 N POWERLINE ROAD FT LAUDERDALE FL 33309 81 Name Serry Jackson, Jerry Street Address (P.O. Box Number is Not Acceptable) Power Court Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City Power Street Address (P.O. Box Number is Not Acceptable) 85 Street Address (P.O. Box Number is Not Acceptable) 86 Street Address (P.O. Box Number is Not Acceptable) 87 Street Address (P.O. Box Number is Not Acceptable) 88 Street Address (P.O. Box Number is Not Acceptable) 89 Street Address (P.O. Box Number is Not Acceptable) 80 Street Address (P.O. Box Number is Not Acceptable) 81 Street Address (P.O. Box Number is Not Acceptable) 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable)					
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 harne of registered agent	and title if applicable (NOTE:	Registered Agent signature re	equired when reinstating) DATE	<u></u>
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	DELETE	1.1 TITLE	Isallon Jerry Change Addition	S (5/98)
NAME	ISACKSON, JERRY		1.2 NAME	2001 Gateway Prine Pompano Brach FL 33069	8
STREET ADDRESS	5300 N POWERLINE ROAD		1.3 STREET ADDRESS	That Bateman vince	Щ
CITY-ST-ZIP	FT LAUDERDALE FL 33309		1.4 CITY-ST-ZIP	Pompano Beach FL 33069	- 8
TITLE		DELETE	2.1 TITLE	Change Additi	
NAME			2.2 NAME		
STREET ADDRESS			2 3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP	<u> </u>	
TITLE		DELETE	3.1 TITLE	Change Additu	on
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP	<u> </u>		3.4 CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE	Change Additi	on
NAME			. 4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE	Change Additi	וים
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		_] DELETE	6.1 TITLE		on
NAME			6.2 NAME	-09/17/98-01080-037 P	
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP		, <u></u>	6.4 CITY-ST-ZIP	***158.75 91/6	-
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.					