02211999-90033-042-\$150.00-\$150.00

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PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Secretary of State
DIVISION OF CORPORATIONS

1999

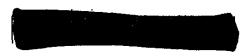
DOCUMENT # P97000014428

AB CONSULTING FIRM, INC.

Principal Place of Business CHANGS FOR Mailing Aboress
7814 SCARSDALE WAY
OCA RATON FL 33498 1 7099 WHI KHAUGHIA SCARSDALE WAY
BOCA RATON FL 33498

FILED Feb 21, 1999 8:00 am Secretary of State

02-21-1999 90033 042 ***150.00



7814 SCARS			
BOCA RATON FL 33498 1094 WHI RETTILL BOCA RATON FL 33498			DO NOT INDITE IN THIS CO. OF
	O. A RAIN TO ZUGO		DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified
	(B)Ch14111 35110		02/11/1997
	Place of Business 2a. Mailing Address		4. FEI Number Annied For
1709	99 WHITEHAVEN DRIVE 26 17099 WHITE	HAVEN DA	NOT APPLICABLE Not Applicab
Suite, Apt	. #, etc. Sulte, Apt. #, etc.		\$2.75 Additional
	27	<u></u>	Fee Required
City & Sta		· 10 - 10 -	6. Election Campaign Financing \$5:00 May Be
¥⊘⊕⊘ Zip			Trust Fund Contribution Added to Fees
≅ુંશ્રુજ્ઞત		Country	
1	9. Name and Address of Current Registered Agent	<u> </u>	Personal Property Tax. Yes CNo
	5. Helio tilo Address or Carrest Registered Agent	81 Name	10. Name and Address of New Registered Agent
BER	RNHARDT, PETER M ESQ		<u> </u>
400	AUSTRALIAN AVENUE SOUTH	82 Street A	ddress (P.O. Box Number is Not Acceptable)
	TE 500	83	
WES	ST PALM BEACH FL 33401		· .
		84 City	85 Zip Code
Pursuant	to the provisions of Sections 807,0502 and 607,1508. Florida Statutes	the above-named or	proparation submits this statement for the purpose of changing its registered
office or t	registered agent, or both, in the State of Florida. Such change was aut	orized by the corpor	orporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered
agent (a	I L. A COLOR OF SECTION BUY, USUS, Florid	a Statutes.	-1 u l oa
NATURE	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Ri	egistered Agent algorature requ	2116 99
	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
	PERSIDENT OLIMINA DELETE	11 TITLE	Change Addition
	BREOVER ANDE CAMPAGE A CO	1.2 NAME	
ET ADDRESS	17814 SCARSDALE WAY BOCA RATON FL 33498 17099W41TE HAVED DE	1.3 STREET ADDRESS	•
ST-ZIP	BOCA RATON FL 33498	1.4 C/TY-ST-20P	
	I S & OO. —A in IOV VIT DELETE	21 TITLE	☐ Change ☐ Additio
•	BRECKER, ANNE 33496	2.2 NAME	_ · ·
ET ADORESS	17814 SCARSDALE WAY	2.3 STREET ADDRESS	
ST-ZIP	BOCA RATON FL 33498	2.4 CITY- ST-ZIP	
ļ	T Kordsucory □ DELETE	31 TITLE	☐ Change ☐ Addition
ţ	BECKER ANNE	3.2 NAME	
T AOORESS	17814 SCARSDALE WAY	3.3 STREET ADDRESS	
ST-ZIP	BOCA RATON FL 33496	3.4. CITY-81-ZIP	
	DELETE	4.) TILE	☐ Change ☐ Addition
- 1			
	}	4. 2 NAME	
1		4. 2 NAME 4.3 STREET ADDRESS	
1		4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	· ·
1	☐ DELETE	4.3 STREET ADDRESS 4.4 CITY-ST-ZP 5.1 TITLE	☐ Change ☐ Addition
ST-20P	☐ DELETE	4.3 STREET ADDRESS 4.4 CITY-ST-ZP 5.1 TITLE 5.2 NAME	☐ Change ☐ Addition
ST-ZIP	☐ DELETE	4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	☐ Change ☐ Addition
ST-ZIP		4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
ST-ZIP	☐ DELETE	43 STREET ADDRESS 4.4 CITY-5T-2P 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-2IP 6.1 TITLE	☐ Change ☐ Addition☐ Change ☐
ST-ZIP ET ADDRESS ST-ZIP		43 STREET ADDRESS 4.4 CITY- 5T-2P 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-2P 6.1 TITLE 8.2 NAME	· .
ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP		43 STREET ADDRESS 4.4 CITY-5T-2P 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-2IP 6.1 TITLE	· .

SIGNATURE:

LULLE THE LOCAL PRINTED HAME OF EIGHING OFFICER OR DIRECTOR

3 27 99

Davitres Phone 6