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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham 🚽

Secretary of State DIVISION OF CORPORATIONS

FILED Feb 26 1998 8:00am Secretary of State

1. Corporation		# P970	100018	3771 (() }					
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ן טטט ז	OB CONS	ultants, inc	<i>,</i>							
Principal Place	ce of Business	2	Mail	ling Address				(di di fati bo thi de toi i		
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3018 CLINTON STREET SOUTH GULFPORT FL 33707				3018 CLINTON STREET SOUTH GULFPORT FL 33707						
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Ì							3. Date Incorporated or Q	ualified		
							02/21/1997			
	2. Principal Place of Business			2a. Mailing Address			4. FEI Number	1071		plied For
21 Cuito Ant	# 515		26	Suite, Apt. #, etc.			24244	107H		t Applicable
Suite, Apt. #, etc.							5. Certificate of Status De	sired 🔲	\$8.75 / Fee Re	
City & Sta	te			City & State			a Finalina Communica Fina			
23			- 1	28			 Election Campaign Final Trust Fund Contribution 	_ —	\$5.00 Added t	
Zip		Country			Country	••	8. This corporation owes of			
24	Ì	25	29		30		Personal Property Tax (•] No
	9, Name	and Address of Co	ırrent Registe	red Agent		_	10. Name and Address of	New Registere	d Agent	
ST	ANLEY, RUS	SSELL A			81 N	Name V	with F	STAN	1PM	
3018 CLINTON STREET SOUTH						Street Addres	ss (P.O. Box Humber is Not	Streeptable)	\	
GULFPÖRT FL 33707						- उ	DIX CLINI	770 -	<u>5</u> 7 !	
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					110	ニンヘしゃ	(DO/T)	Fi		7717
11, Pursuant	to the provision	ons of Sections 607	1.0502 and 607	.1508, Florida St.	alutes, the above-na	amed corpo	ration submits this statement n's board of directors. I here	for the purpose	of changing its	s registered
agent. I	am landij ir wit	h, and accept the i	phligations of S	Section 607.0505	, Florida Statutes.	e corporatio	ins board of directors. There	оу ассері іне ар	opomiment as	registered
SIGNATURE	$\mathcal{X}^{\mathcal{N}}$	イアン	4 mule							
10	Signalure Myped	of proled name of register	ad agent and like if a S AND DIRECTO		NOTE Registered Agent si	ignature required		DATE		
12.	D	OFFICENS	AND DIRECT	DELETE	13. 1.1 TITLE	- (K)	1 CONTINUES I	O OFFICERS AN		S IN 12 Addition
NAME	_	/, Russell a		A suite	1.2 NAME	K	CUTY Sto	nlu	Change	X AUGINOII
STREET ADDRESS		INTON STREET S	OUTH		1.3 STREET ADD	RESS 3	018 Clusto	n SKOKE	.	
CITY-ST-ZIP		RT FL 33707			1.4 City-St-Zi	- A	70.81 2016	Ol no	~	
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CITY-ST-ZIP					2. 4 CITY-ST-Z	0	full port	Ήa".	2370	ר (
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TITLE				☐ DELETE	4.1 TITLE				Change	☐ Addition
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CITY-ST-ZIP	_				4.4 CITY - ST - ZIF	Р				
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CITY-ST-ZIP			A 50 A 7 450		6.4 CITY-ST-ZIF		oction 119 07/3/(i) Florida St			

Inereby 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 informatic 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 trusteerempowered 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.