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**PROFIT** CORPORATION ANNUAL REPORT

1999

1. Corporation Name



DOCUMENT # P97000026737

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## FILED Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90067 049 \*\*\*150.00

## WRIGHT CONSULTANTS INTERNATIONAL, INC. Mailing Address Principal Place of Business 7150 SUNSET WAY 701E 7150 SUNSET WAY #701E ST PETERSBURG BCH FL 33706 ST PETERSBURG BCH FL 33706 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 03/25/1997 2a. Mailing Address 4. FEI Number Applied For 2. Principal Place of Business 26 65-0738887 Not Applicable 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #. etc. 5. Certificate of Status Desired Fee Required 22 27 City & State \$5.00 May Be City & State Election Campaign Financing Trust Fund Contribution Added to Fees 28 23 Zio Country Country Zip This corporation owes the current year Intangible □No 30 Personal Property Tax. 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name DIANE K SOMMERER ESQ 82 Street Address (P.O. Box Number is Not Acceptable) 3300 UNIVERSITY DR #225 CORAL SPRGS FL 33065 83 Zip Code 85 84 City 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)

OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 1.1 TITLE Change

12. Addition TITI F WRIGHT, ALEXANDRA P 1.2 NAME NAME 7150 SUNSET WAY #701E 1.3 STREET ADDRESS STREET ADORESS ST PETERSBURG BCH FL 33706 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ DELETE 2.1 T/TLE TITLE SOMMERER, DIANE K 2.2 NAME NAME 3300 UNIVERSITY DR, STE 225 🧢 2.3 STREET ADDRESS STREET ADDRESS **CORAL SPRINGS FL 33065** 2.4 CITY-ST-ZIP CITY-ST-ZIF Change ☐ Addition DELETE 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE ☐ Change ☐ Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ DELETE 6.1 TITLE Change TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 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 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, with all other like empowered

SIGNATURE:

CR2E034 (11/98