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

FILED Feb 10 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #**1. Corporation Name P97000027499 (7) D.G. WRIGHT CONSULTANTS, INC. **Principal Place of Business** Mailing Address 5861 S.W. 87TH STREET 5861 S.W. 87TH STREET MIAMI FL 33143 MIAMI FL 33143 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/24/1997 Applied For 28. Mailing Address
26. G619 S. Divie Highway 2. Principal Place of Business 4. FEI Number 21 Not Applicable Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired 730x 107 Fee Required 22 City & State 6. Election Campaign Financing \$5.00 May Be Miami 23 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intancible 33143 USA Yes 24 25 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name 81 WRIGHT, DIANNE G **5861 S.W. 87TH STREET** 82 Street Address (P.O. Box Number is Not Acceptable) MIAM! FL 33143 83 84 City 85 Zip Code 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 (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE WRIGHT, DIANNE G NAME 1.2 NAME 5861 S.W. 87TH STREET STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33143 CITY-ST-ZIP 1.4 CITY - ST-ZIP DELETE Change Addition TITLE 21 TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - 2IP DELETE Channe Addition TITLE 3.1 TITLE KAME 32 NAME **3.3 STREET ADDRESS** STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADORESS CITY-S1-ZIP 4.4 CITY-ST-ZIP DELETE ☐ Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS

14. Thereby 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

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

61 TITLE

62 NAME

DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME

Dianne G. Wright 1/31/98 305/668-4929

CR2E034

Change

Addition