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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000047975 (2)

BENCHMARK CONSULTANTS, INC.

Principal Place of Business

104 MOUND ST LONGWOOD FL 32750 Mailing Address

104 MOUND ST LONGWOOD FL 32750

FILED Feb 13 1998 8:00am Secretary of State



					DO NOT WITH	1111110017102	
					3. Date Incorporated or Qualified		ľ
a b 1 b	The state of the s	1 - 11515 11533			05/29/1997	, ,	
2. Principal Place of Business		2a. Mailing Address			4. FEI Number	├	Applied For
21 to A YOUNDST		26 1-04-MOUN	''''''		593458628		Not Applicable
Suite, Apt #. etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		Additional	
22 404 40000 37 City & State		City & State				Required	
— : <i>n</i>				6. Election Campaign Financing		O May Be	
23 4070	wood FL	28 20 N O W	Country	_	Trust Fund Contribution		d to Fees
	SO 25 SEMMOLE	1 '	30 5 = ~~	. arnt.E	8. This corporation owes or has pa		Intangible No
24 3275	9. Name and Address of Current	4	30 38 44		Personal Property Tax due June 10. Name and Address of New Re-		KT 140
N	and the contract of the contra	ingistered Agent	81	Name	10. Name and Address of New Ne	gistated Again	
	ISCIANO, THOMASE P.	I Paris					
	MOUND ST		82 Street Address (P.O. Box Number is Not Acceptable)			le)	
ι	NGWOOD FL 32750		83			 	· · · · · · · · · · · · · · · · · · ·
			63				
			84	City		85 Zi	p Code
						FL "	
11. Pursuant	to the provisions of Sections 607.0502 registered agent, or both in the State o	and 607-1508, Florida Statute L'Horida, Sucla chappo was a	s, the above-	named corpor	ration submits this statement for the p	urpose of changing	its registered
agent la	ingistered agent, or born in the state o im familiar with, and accept the oblig d	ons of, Section 607.0505, Fto	rida Statutes.	ne corporation	is board of directors. Thereby accep	и ше арронипени	as registered
SIGNATURE							
	Signature, typed or proceed name of regulated agent			signature required		DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC		
TITLE		☐ DELFTE	11 TITLE	72	ASIDENT	☐ Chang	e 🔀 Addition
NAME			1.2 NAME	7	HOMAS F. RUSCIAN	, 0	
STREET ADDRESS			1.3 STREET A		4 MOUND ST		
CITY-ST-ZIP			1.4 C(TY-ST-	ZIP 🚜 🗭	NOWIND PL 3275	0	
TITLE		DELETE	2.1 TITLE	J.	LF PRES	Chang	e 🔼 Addition
NAME			2.2 NAME	186	STTE. FLOREN		ŀ
STREET ADDRESS			2 3 STREET A	DDAESS 🗣	97 ALHER WOODAU	rj.	
CITY-ST-ZIP			2. 4 CiTY-ST	-ZIP	ONE WOOD PL 327	50	
TITLE		☐ DELFTE	3.1 JITLE	84	CRETARY / TREAS	Chang	e 🔀 Addition
NAME			3.2 NAME		MAIMRUSCIANO		ĺ
STREET ADDRESS			3.3 STREET A	ODRESS 10	4 MOUND ST		
CITY-ST-ZIP			3.4. CITY - ST		NEW ood PL 3275	50	
TITLE	Contract Con	DELFTE	4.1 TITLE			☐ Chang	e Addition
NAME			4, 2 NAME	i			
STREET ADDRESS			4.3 STREET A	DDRESS			
CITY-ST-ZIP			4.4 CITY-ST-				
TITLE		DELETE	5.1 TtTLE	E.11	· ·	☐ Chang	e
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET A	nnocce			
CITY-ST-ZIP							
TITLE		DELETE	5.4 CITY - ST- 6.1 TITLE	Tit.		Chano	Addition
NAME		beter	6.2 NAME			L. Johany	- La redition
STREET ADDRESS			6 3 STREET A				
CITY-ST-ZIP		thur the contract of the	6 4 CITY-ST-		notion 110.07(2Vi) Florida Diet	further contitues	ha infarmation
T4. I hereby o	certify that the information supplied with	i this wing does not quality to	r ina exemptia	on stated in Se	ection 119.07(3)(i), Florida Statutes. I	turtner certity that t	ne information

Tate and that my signature shall have the same legal effect as if made under oath, that I am an execute this report as required by Chapter 607, Florida Statutes; and that my name appears in officer or director of the corporation of Block 12 or Block 13 if changed, or