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

DOCUMENT #
1. Corporation Name P97000053096 (8)

BERRY CONSULTANTS, INC.

FILED Apr 20 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address				
6900 SW 127TH COURT MIAMI FL 33183		6900 SW 127TH COURT MIAMI FL 33183				DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						06/16/1997
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number Applied For
21		26				65-0762902 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional
22		27				Fee Required
City & State	9	City & State				6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution L Added to Fees
Zip	Country	Zip	\vdash	Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
24	25 9. Name and Address of Curren	29 Annut	30	<u>'l</u>		Personal Property Tax due June 30. Yes Li No 10. Name and Address of New Registered Agent
DEC.		Triagiatorea regent		B1 Na	me	10.
	BERRY, JERE L 6900 SW 127TH COURT					(D.C. D., M. obs.) Market and black
	MI FL 33183			B2 Str	eet Addre	ess (P.O. Box Number is Not Acceptable)
MIM	IMI FL 33 163		Ì	63		
			}	64 Cit	v	 85 Zip Code
					•	FL ` `
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 it applicable (NOTE: Registered Agent signature required when reinstating) DATE						
12. OFFICERS AND D					iature rectumen	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	Ď	DELETE		1.1 TITLE		Change Addition
NAME	BERRY, JOHN		1.2 NAI	1.2 NAME		
STREET ADDRESS	6900 SW 127TH COURT		1.3 STF	REET ADDR	ESS	
CITY-ST-ZIP	MIAMI FL 33183		1.4 CIT	Y-ST-ZIP		
TITLE	D	DELETE 2.1		LE		Change Addition
NAME	Be rry, Jere L		2.2 NAME			
STREET ADDRESS	6900 SW 127TH COURT		2.3 STF	2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33183			TY-ST-ZIP		
TITLE		☐ DELETE	3.1 ไป			L. Change L. Addition
NAME		3.2				
STREET ADDRESS				REET ADDR		
CITY-ST-ZIP TITLE		DELETE	3.4. CT 4.1 TIT	TY-ST-ZIP	-	Change Addition
NAME			4. 2 NA			
STREET ADDRESS					FSS	
CITY-ST-ZIP			4.3 STREET ADDRESS 4.4 City - St - Zip			
TITLE		DELETE	_	5.1 TITLE		Change Addition
NAME				5.2 NAME		
STREET ADDRESS				REET ADDR	ESS	
CITY-ST-ZIP			1	Y - ST - Z (P		
TITLE		☐ DELETE	6.1 TIT			Change Addition
NAME			6.2 NA	ME		İ
STREET ADDRESS			6.3 \$16	reet addr	ESS	
CITY-ST-ZIP			6.4 CIT	Y-ST-ZIP		
	7					Continue 140 07(9)(i) Elected Statuton Europe partitude that the information

I hereby certify that the information supplied with this filling 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 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.