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 # P97000071400 (0)

SHULMAN CONSULTING, INC.

FILED
May 14 1998 8:00am
Secretary of State



Principal Place of Business Mailing Address						f (SERIODE) sim barri tobert derrit maker derrit rabbit trans, gract gabrit gabr
9657 31ST WAY 8 ST PETERSBURG FL 33712		6657 31ST WAY 8 ST PETERSBURG FL 33712				
SI PETERSBURG PL 33/12		SI PETENSBUNG PL 33/12				DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified 08/18/1997
2. Principal Place of Busin	OSS	2a. Mailing Addre	ISS			4. FEI Number Applied For
21		26				59-3505081 Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.				SR 75 Additional
22		27				5. Certificate of Status Desired Fee Regulred
City & State		City & State				6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zφ	C	ountry		8. This corporation owes or has paid the current year Intangible
24	25	29	30			Personal Property Tax due June 30. 🔲 Yes 🔲 No
	and Address of Current F	Registered Agent				10. Name and Address of New Registered Agent
TAYLOR, GERALD M				81	Name	·
9216 SUNFLOWER DR				82	Stroot Ac	ddress (P.O. Box Number is Not Acceptable)
TAMPA FL 336			102	Direct Ac	duress (F.O. Box Humber is Not Acceptable)	
				83		
				84	City	FL 85 Zip Code
						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, typical or printed harms of region and at the diagraph above. (NOT): Registered Agent signature required when reinstating). DATE						
12.	OFFICERS AND D	DIRECTORS	13	3.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE DP		☐ DEL	.ETE 1.1	TITLE		Change Addition
NAME SHULMA		12	NAME	1		
STREET ADDRESS 6657 31		1.3	STREET	ADDRESS		
CITY-ST-ZIP ST PETE	RSBURG FL 33712		1.4	CITY-S	T-ZIP	
TITLE		DEL	.ETE 2.1	TITLE		Change Addition
NAME			2.2	NAME		
STREET ADDRESS			2.3	STREET	ADDRESS	
CITY-ST-ZIP			2.	4 GITY - S	ST-ZIP	•
TITLE		☐ DEL	ETE 3.1	TITLE		Change Addition
NAME			32	NAME	}	
STREET ADDRESS			33	STREET	ADDRESS	
CITY-ST-ZIP				CITY-S	51 - ZIP	
TITLE		☐ DE	ETE 4.1	TITLE	T-	Change Addition
NAME			4.2	2 NAME		i
STREET ADDRESS			4.3	STREET	ADDRESS	
CITY-ST-ZIP				CITY-S	T- ZIP	
TITLE		DEL	ETE 5.1	TITLE		Change Addition
NAME			5.2	NAME		
STREET ADDRESS			5 3	STREET	ADDRESS	
CITY-ST-ZIP				CITY-S	T-ZIP	
TITLE		☐ DEL	ETE 6.1	TITLE		Change Addition
NAME			6.2	NAME	Į	į
STREET ADDRESS			6.3	STREET	ADDRESS	
CITY-ST-ZIP			6.4	CITY-S	7-ZIP	

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.

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