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

PROFIT CORPORATION ANNUAL REPORT

1998

officer or director of the corporation or Block 12 or Block 13 if changed, or op



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P97000076078 (9)

INNERPOWER CONSULTING INCORPORATED

FILED May 01 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						
22799 PINEW		PINEWOOD CT				
BOCA RATON FL 33433 BOCA RATON FL 33433						DO NOT WRITE IN THIS SPACE
-						3. Date Incorporated or Qualified
						09/03/1997
2. Principal Pi	ace of Business	2a. Mailing	2a. Mailing Address			4. FEI Number Applied For
21		26				65-018483 Not Applicable
Sulte, Apt. :	#, 6 tc.	Suite, A	pt. #, etc.			5. Certificate of Status Desired See Reguired Fee Reguired
	City & State City & State			ite		6. Election Campaign Financing \$5.00 May Be
23						Trust Fund Contribution
Zip	Country	Zip		Country		8. This corporation owes or has paid the current year Intangible
24	25 9. Name and Address of Curr	29 Popletored As	uant .	30		Personal Property Tex due June 30. Yes No 10. Name and Address of New Registered Agent
A. A.		ent negistered Ag	I III	81	Name	10. Hame and Address of New Registered Agent
•	ERILAWYER CHARTERED BALMERIA AVENUE			82		
				Street A	Address (P.O. Box Number is Not Acceptable)	
	RAL GABLES FL 33134		83			
				84	City	FL 85 Zip Code
11. Pursuant t	to the provisions of Sections 607.0	502 and 607.1508,	Florida Statut	es, the above	-named c	corporation submits this statement for the purpose of changing its registered
agent. I ar	egi ste red agent, or born, in the Sta m f a miliar with, and accept the obl	ite of Florida, Such igations of, Section	607.05 0 5, Fli	authorized by orida Statutes	rine corpo 3.	corporation submits this statement for the purpose of changing its registered to action's board of directors. I hereby accept the appointment as registered
SIGNATURE						
	Signature, typed or printed hame of registered		i. (NO1		int signature ri	required when reinstating) DATE
12.	DPST	ND DIRECTORS	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
NAME	HUDSON, JOSEPH R III	•		1.2 NAME		A Change Page 1100
STREET ADDRESS	22799 PINEWOOD CT			1.3 STREET	ADDRESS	72+ NE STREET
CITY-ST-ZIP	BOCA RATON FL 33433			1.4 CITY - S		BOGG POTON FL 3348-7,
TITLE	VOORTHURION TE GOTOG		DELETE	2.1 TITLE	r En	★ Change
NAME				2.2 NAME	1	
STREET ADDRESS				2.3 STREET	ADDRESS	245 N. OCEGN BIVE # 202
CITY-ST-ZIP				2. 4 CITY - 5	ST-ZIP	Deerheid beach PL 33441
TITLE		Ţ	DELETE	3 1 TITLE		☐ Change ☐ Addition
NAME				3.2 NAME	İ	
STREET ADDRESS				3.3 STREET	ADDRESS	
CITY-ST-ZIP			Therese	3.4. CITY - 9	T · ZIP	
TITLE		L] DELETE	4 1 TeTLE		☐ Change ☐ Addition
NAME				4. 2 NAME		
STREET ADDRESS				4.3 STREET		
CITY-ST-ZIP			DELETE	4.4 CiTY - S	T-ZIP	Change Addition
NAME		L	SCILIL	5.1 THILE		Change Addition
STREET ADDRESS				5.2 NAME	1000000	,
CITY-ST-ZIP				5.3 STREET	1	•
TITLE			DELETÉ	5.4 CITY - S 6.1 TITLE	I-ZIP	Change · Addition
NAME				6.2 NAME	1	
STREET ADDRESS			/	6.3 STREET	ADDRESS	
CITY-ST-ZIP		. 1		6.4 CITY - S		
14. I hereby c	ertily that the information supplied	with this filling loes	qualify fo	or the exemp	ion stated	d in Section 119.07(3)(i), Florida Statutes. I further certify that the information
indicated of c	on this annual report or supplemental director of the corporation or the corporation or the fo	ntal artiual report is eiver or trustee a	True and acc prowered to	curate and that execute this i	at my sign. report as r	nature shall have the same legal effect as if made under oath; that I am an required by Chapter 607, Florida Statutes; and that my name appears in