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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # 1. Corporation Name P97000090685 (3)

FILED Apr 03 1998 8:00am Secretary of State

ASLAN CO	ONSULTING, INC.	Mailing Addross			
, , , , , , , , , , , , , , , , , , , ,					
SUITE 305 BOCA RATON FL 33433		6085 BALBOA CIRCLE SUITE 305 BOCA RATON FL 33433	1	DO NOT WRITE IN THI	S SPACE
				3. Date Incorporated or Qualified	
2. Principal Place of Business		2a. Mailing Address		10/20/1997 4, FEI Number	Applied For
21		26		65-0788597	Not Applicable
Suite, Apt #, etc.		Suite. Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired Fee Required	
City & State		City & State		6. Election Campaign Financing \$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees
Zıp	Country	Zip	Country	8. This corporation owes or has paid the o	
24	25	29	30	Personal Property Tax due June 30.	Yes No
	, Name and Address of C		11,	10. Name and Address of New Registere	d Agent
FINANCIAL FOUNDATIONS, INC. 2843 THAXTON DRIVE #37 PALM HARBOR FL 34684			83 0085	6085 BALBOA CIA	
			84 City Bu	A PATAN F	L 85 Zip Code 33433
11. Pursuant to the office or registagent. I am fa	ne provisions of Sections 607 stered agent, or both, in the s amiliar with, and accept the c	7.0502 and 607.1508, Florida Statu State of Florida Such chang e w as obligations of, Section 607.0505, F	ites, the above-named cor authorized by the corpora lorida Statutes.	rporation submits this statement for the purpose ation's board of directors. I hereby accept the appropriate the statement of the purpose accept the appropriate the statement of the purpose accept the statement of the statement of the purpose accept the statement of the statement o	of changing its registered oppointment as registered
SIGNATURE	Sum	ERIX S. LAS	PRE DID TE: Registered Agent signature requ	ENT1/	20/92
5104					
12.	DEFICER	S AND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AF	
· · · · · · · · · · · · · · · · · · ·		L) DECEIE	1.1 TITLE		Change Addition
	LAZO, ERIK S	NUTE DOE	1.2 NAME		
STREET ADDRESS 6085 BALBOA CIRCLE, SUITE 305		1.3 STREET ADDRESS			
	BOCA RATON FL 33433	Drugge	1.4 CITY+ST-ZIP		
TITLE		DELETE	2.1 TITLE		Change Addition
NAME			22 NAME		
STREET ADDRESS			2.3 STREFT ADDRESS		
CITY-ST-ZIP			2. 4 CITY - ST - ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		

6.4 CITY - ST - 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 trusted 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 or a statement with an address.

3.4 CITY-ST-ZIP

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-S1-ZIP

4.4 CITY - ST - ZIP

4.1 TITLE

4 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY - ST - ZIP

TITLE

NAME

TITLE

NAME

TITLE

NAME

PRESIDENT

(561) 347-6253

Change

Change

Change

Addition

Addition

Addition