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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATÉ Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

OCHIMENT

FILED Feb 10 1998 8:00am Secretary of State

	TO CONSC	JLTING INC.							
Principal Pl	ace of Busines	SS	Mailing Add	ress				EOINE (OILD HOLD HA (O) (I	IOTH OOM LOOK
1 '	CKET RIDGE D		9	KET RIDGE	מח		Ì		
JACKSONVILLE FL 32258 JACKSONVILLE FL 32258									
			•		· -		DO NOT WRITE IN	THIS SPACE	
							3. Date Incorporated or Qualified		
L							10/27/1997		
2. Principa	2. Principal Place of Business			2a. Mailing Address			4. FEI Number	A	oplied For
21			26				59-3473109	Nt Nt	ot Applicable
Suite, Apt. #, etc.			Suite, Ap	Suite, Apl. #, etc.			5. Certificate of Status Desired		Additional
22			27]				Fee Required		
City & State			City & St	City & State			6. Election Campaign Financing \$5.00 May Be		
23			28				Trust Fund Contribution Added to Fees		
Zip	· •		Ziρ	F-7		1	8. This corporation owes or has paid the current year Intangible		
24	0 \$1	25	[29]		30		Personal Property Tax due June 30		_] No
		and Address of Cur	rent Registered Age	•nt	81	Name	10. Name and Address of New Regis	stered Agent	
	LUOTO, KAP				101	INAMINE			
		KET RIDGE DR.			82	Street Add	Iress (P.O. Box Number is Not Acceptable)		
'	JACKSONVIL	LE FL 32258				ļ			
					83				
					84	City		- 85 Zip	Code
						Ĺ	poration submits this statement for the purp		
office of agent. SIGNATUR	٤	gent, or both, in the St vith, and accept the ob-	-		authorized by orida Statute		tion's board of directors. I hereby accept the		registered
12.		OFFICERS	4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			ent signature requi	ired when reinstating)	DATE	
TITLE	PRES	ON TRACTION	AND DIRECTORS		13.	ent signature requ	red when reinstating) ADDITIONS/CHANGES TO OFFICER		RSIN 12
NAME	ے مرمد سات			DELETE		ent signature requi			RS(IN 12 Addition
NAME KAREN LUOTO RIDGE DR. STREET ADDRESS (273 O THICKET RIDGE DR.					13.	and and parmie reduced		S AND DIRECTOR	
STREET ADDRES	\$ 12730	N LUOTO THICKET R	106E DN	DELETE	13. 1.1 TITLE			S AND DIRECTOR	
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	JA 4	N LUOTO THICKET R	106E Dn 58	DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET	ADDRESS		S AND DIRECTOR	
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indicated on this annual report or supplimental 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 (Achanged, or on an attachment with an address.

904-296-5063