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 P97000097427 (3)

P.J.C. CONSULTING, INC.

FILED May 26 1998 8:00am Secretary of State



						<u>-</u>			
Principal Place of Business Mailing Address									**** 188* 188*
10819 LIMEBERRY DRIVE 10819 LIMEBERRY DRIVE COOPER CITY FL 33026 COOPER CITY FL 33026									
COOPER CIT	1 FL 33026	COOPER CITY FL 33026			DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualified	- 111101	JI FIOL	
						11/14/1997			
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		I A	pplied For
21		26				65-0794184			ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				Contificate of Ctatus Desired			Additional
22		27				5. Certificate of Status Desired	LJ	Fee R	equired
City & State	e	City & State				6. Election Campaign Financing		\$5.00	May Be
23		28	т			Trust Fund Contribution		Added	to Fees
Zip	Country	Zip	Cour	ntry		8. This corporation owes or has p	-		
24	9, Name and Address of Curren	1 Backtered Agent	30			Personal Property Tax due June			No
CE	RUZ, PEDRO J	r uadistatan waatt		81	Name	10. Name and Address of New Re	egisterea /	Agent	
	819 LIMEBERRY DRIVE		j	٠.	Maine				
	OPER CITY FL 33026		ſ	82	Street Addre	ess (P.O. Box Number is Not Accepta	ble)		
	OFER CITT FE 33026		ŀ	83					
	æ			33					
	<i>[</i>		ľ	84	City	**************************************	FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607 1508, Florida Statu	ules, the ab	ove	-named corpo	oration submits this statement for the	purpose of	changing i	ts registered
office or re agent. I a	e gister ed age nt , or both, in the State in fam iliar with, and accept the obliga	of Florida. Such change was stons of Section 607,0505. F	authorized lorida Stati	l by	the corporation	oration submits this statement for the on's board of directors. I hereby acce	pt the app	ointment as	registered
SIGNATURE									
	Signature, typed or printed name of registered ager		TE: Registered	Ager	nt signature require	d whon reinstating)	DATE		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFI	CERS AND	DIRECTOR	
TITLE	PVST	☐ DELETE	1.1 TIT	LĒ				Change	Addition
NAME	CRUZ, PEDRO J		12 NAI	ME					
STREET ADDRESS	10819 LIMEBERRY DRIVE COOPER CITY FL 33028		1.3 STF	AEET A	address				
CITY-ST-ZIP	000rch 0111 FL 33020	T cerese	1.4 CIT		1-7IP				
TITLE	•	☐ DELETE	21 111	LE				Change	Addition
NAME	CRUZ, PEDRO J 10819 LIMEBERRY DRIVE		2.2 NA	ΜE					
STREET ADDRESS	COOPER CITY FL 33026		2.3 STF	REET	ADDRESS				
CITY-ST-ZIP	COUPER CITT FL 33020	T DELETE	2. 4 CIT		T-ZIP				
TITLE		L DELETE	3.1 TIT					Change	Addition
NAME			3.2 NAI						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP		Drieze	3.4. CIT		T-ZIP				7
TITLE		☐ DELETE	4.1 TITE					L Change	Addition
NAME			4. 2 NA						
STREET ADDRESS			4.3 STR	IEET A	address				
CITY-ST-ZIP		Deser	4.4 CIT	_	- ZIP			F-1	
TITLE		☐ DELETE	5.1 TITL					Change	☐ Addition
NAME			5.2 NAM						
STREET ADDRESS			5.3 STR	REET A	Address				
CITY-ST-ZIP			5.4 CIT		- ZIP				
TITLE		☐ DELETE	6.1 TITL	LΕ]			Change	Addition
NAME			6.2 NAN	NE	1				
STREET ADDRESS			6.3 STR	EET A	ADDRESS				
CITY-ST-ZIP			6.4 CIT	Y-ST	- 7IP				

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.