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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000028735

1. Corporation Name

FINANCIAL FOCUS GROUP, INC.

FILED Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90267 016 ***150.00



Principal Place of Business Mailing Address								
8268 BERKELEY SPRING HILL FL		8268 BERKELEY MANOR SPRING HILL FL 34606	8268 BERKELEY MANOR BLVD. SPRING HILL FL 34606			DO NOT WRITE IN TH	IS SPACE	
						3. Date Incorporated or Qualifed 03/11/1998		
2. Principal Pl	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	A	pplied For
21		26	26			59-3407982		lot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	•	Additional Required
City & State		City & State	28			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees		
Zip	Country	Zip	Cou	intry		8. This corporation owes the current year		
24	25 29		30	30		Personal Property Tax.	☐ Yes	Ū⁄No
	9. Name and Address of Curr	ent Registered Agent		ļ.,,		10. Name and Address of New Registere	d Agent	
				81	Name			1
8268	es, mary l Berkeley manor blvd.			82	Street Addr	ess (P.O. Box Number is Not Acceptable)		
SPRI	NG HILL FL 34606			83			,	
				84	City	F	85 Zip	Code
		500 4 007 4509 Florido Sto	tutas tha s	<u> </u>	nomed com	aretian submits this statement for the purpose	of changing if	ts registered
office or re agent. I as	to the provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the obli	te of Florida. Such change was gations of, Section 607.0505, I	s authorized Florida Stat	d by t utes.	he corporation	on's board of directors. I hereby accept the app	Million as i	registered
SIGNATURE	Mary Nov Ja	mes Preside	eir			<u> </u>	<u>5-99</u>	
Signature, typed or printed name of redistered agent and title if applicable. (NOTE: Re					signature require			ODC IN 12
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS	Change	
TITLE	D	☐ DELETE	1.1 TI				ال مارس الم	
NAME	JAMES, MARY L	450	1.2 N					1
STREET ADDRESS 8268 BERKELEY MANOR BLV		J. 1.3		1.3 STREET ADORESS				
CITY-ST-ZIP	SPRING HILL FL 34606			1.4 CITY-ST-ZIP			Change	Addition
TITLE	_			2.1 TITLE			Criange	. D Addition
NAME			2.2 NAME					
STREET ADDRESS			2.3 S	2.3 STREET ADDRESS				
CITY-ST-ZIP			2.4 C		-ZIP .			- Addison
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NAME				AME			•	
STREET ADDRESS			4.3 S	TREET	ADDRESS			ľ
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STREET ADDRESS					ADDRESS	•		ĺ
CITY-ST-ZIP				TY-ST	-ZIP			- DAddisa-
TITLE		☐ DEŁETE					☐ Change	e 🔲 Addition 🖁
NAME '			6.2 N					
STREET ADDRESS			6.3 S	TREET	ADDRESS			}
CITY-ST-ZIP			6.4 C	ITY-ST	-ZIP			

CITY-ST-ZIP 14. I hereby 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, with all other like empowered.

SIGNATURE: