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PROFIT CORPORATION ANNUAL RÉPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

980000 30177

1. Corporation Name

CONSULTING, INC. THESIER

Principal Place of Business

Mailing Address

2523 EAST RETUNDA PARKWAY CAPE CORAL, FL 33904

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SAME

DO NOT WRITE IN THIS SPACE

May 15, 1999 8:00 am

Secretary of State

05-15-1999 90025 042 ***150.00

3. Date Incorporated or Qualifed MARCH 30, 1998 2. Principal Place of Business 4. FEI Number Applied For 2a. Mailing Address Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 8. This corporation owes the current year Intangible MNo 30 Personal Property Tax. ☐ Yes 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name THESIER PATRICK Street Address (P.O. Box Number is Not Acceptable) 82 2523 E. RETUNDA PKWY 83 CAPE CORAL, FL 33904 Zip Code 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. □ DELETE ☐ Change ☐ Addition 1.1 DTLE TITI F 1.2 NAME PATIZICK THESIED NAME 2523 & RETUNDA PKWY 1.3 STREET ADDRESS STREET ADDRESS CAPE CORAL, FL 33904 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition [] DELETE Change 2.1 TITLE TITLE 2.2 NAME THESIER NAME TANET 2523 E. RETUNDA PKWY 2.3 STREET ADDRESS STREET ADDRESS CAPE CORAL FL 33904 2.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition DELETE 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change ☐ Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE 51 TM E 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP □ DELETE 6.1 TITLE ☐ Addition 6.2 NAME NAME **6.3 STREET ADDRESS** STREET ADDRESS 6.4 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 chapted, or on an attachment with an address, with all other like empowered.

5/19/99 PATRICK A. THESIER SIGNATURE:

CR2E034 (11/98)