## 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 # P98000034808

MANAGEMENT TRAINING AND EDUCATION CONSULTING, IN CORPORATED .

Principal Place of Business

Mailing Address

## FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90199 042 \*\*\*150.00



		8111 E. GREENWOOD AVENUE TAMPA FL 33604		DO NOT WRITE IN THIS SPACE
	•			3. Date Incorporated or Qualifed 04/15/1998
2. Principal Place of Business 2a. Mailing Address				4. FEI Number Applied For
1 11402 Gibraltar Pl 26 11402 Gibraltar PL				Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.			· ,-	5. Certifcate of Status Desired
City & State  City & State  Tampa F  Zampa F			<u></u>	6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees
Zip Country  Zip Country  3 3 6 1 7 25 Hills boroup 3 3 6 1 7 30 Hills boroup 8. This corporation owes the current year Intangible Personal Property Tax.				
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent				
HAYNES, JEFFREY 8111 E. GREENWOOD AVENUE 81 Name R PSH & B R B A R				
TAMPA FL 33604 83 11402				402 Gibraltar PL
٠.			84 City 7	ampa FL 85 Zip Code 3 3 647
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)  DATE				
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	PD	☐ DELETE 1	1 TITLE	PD Nation Addition
NAME	RASHEED, BARBARA	1.	2 NAME	RASHELD. BARBARA
STREET ADDRESS	4411 PIEDMONT ROAD	1	3 STREET ADDRESS	RASHEED, BARBARA PL.
CITY-ST-ZIP	PENSACOLA FL 32503	1.	4 CITY-ST-ZIP	Tampa FL 33617
TITLE	VD	☐ DELETE 2	1 TITLE	✓ D ZChange ☐ Addition (
NAME	HAYNES, JEFFREY	2	2 NAME	HAYNES JEFFERY
STREET ADDRESS	7609 S. SANIBEL CIRCLE	2	3 STREET ADDRESS	HAYNES, JEFFERY BILL & Green Wood Auc -
CITY-ST-ZIP	TAMPA FL: 33637		4 CITY-ST-ZIP	Tampa FL 33604
TITLE	TD	☐ DELETE 3		MacChange ☐ Addition
NAME .	RASHEED, HOWARD	3	2 NAME	PACIAS 2D HOWARD
STREET ADDRESS	4411 PIEDMONT ROAD	3	3 STREET ADDRESS	RASHEED HOWARD 11402 Gibraltar PL
CITY-ST-ZIP	PENSACOLA FL 32503	3	4. CITY-ST-ZIP	Tampa PL 33617
TITLE	SD	☐ DELETE 4		5 D Change Addition
NAME	RASHEED, CANDACE F	4	. 2 NAME	PASILES O CANDACS.
STREET ADDRESS	3367 MISSION BAY BLVD. #229	1 4	3 STREET ADDRESS	RASHEED CANDACE 602 Goral Glenn Loop 1= 104 A 1 + amonte Spring, 63274 A change Addition
CITY-ST-ZIP	ORLANDO FL 32817		4 CITY-ST-ZIP	A 1+amonto 500 - F1 32714
TITLE			1 TITLE	Change Addition
NAME		5	2 NAME	•
STREET ADDRESS		5	3 STREET ADDRESS	
CITY-ST-ZIP		· 5	4 CITY-ST-ZIP	<u> </u>
TITLE		☐ DELETE 6	.1 TITLE	☐ Change ☐ Addition
NAME		6	2 NAME	
STREET ADDRESS:		6	3 STREET ADDRESS	
JINEE I ADDRESS	1			•

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 of the receiver or trustee empowered to execute his report as required by Chapter 607, Florida Statutes; and that my name appears in officer or director of the corporation of Block 12 or Block 13 if changed, or

SIGNATURE:

CITY-ST-ZIP