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 # P98000040569

FIRST CONSULTING CORP., INC.

FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90126 018 ***150.00



Principal Place of Business Mailing Address						Matte Cator Gratt parer ante	Billin inii ioni
2919 E. COMMERCIAL BLVD SUITE A 2919 E. COMMERCIAL BLVD FT. LAUDERDALE FL 33308 FT. LAUDERDALE FL 33308				. A			
						E IN THIS SPACE	
					3. Date Incorporated or Qualifed		
					05/04/1998		
2. Principal Pl	ace of Business	2a. Mailing Addr	es <u>s_</u>			<u> </u>	plied For
21		26			65-0837225		t Applicable
Suite, Apt. :	#, etc.	Suite, Apt. #	etc.		5. Certifcate of Status Desired	\$8.75 A	
22		27			_	Fee Re	
City & State	e	City & State		•	6. Election Campaign Financing	□ \$5.00	, ,
23		28			Trust Fund Contribution	Added t	o rees
Zip	Country	— — — — — — — — — — — — — — — — — — —		ine y	8. This corporation owes the current	nt year Intangible Yes	□No
24	25	29	30		Personal Property Tax. 10. Name and Address of New Re	A	
	9. Name and Address of Cur	rent Registered Agent		81 Name	10. Name and Address of New Re	gistered Agent	
VAT'	7 ALLEN LA			Name		`	
KATZ, ALLEN H 2919 E. COMMERCIAL BLVD., SUITE A				82 Street Add	ress (P.O. Box Number is Not Acceptab	ile)	
		IE A					
r FI. L	AUDERDALE FL 33308			83			
	• •			84 City		85 Zip 0	Code
						FL `	
office or re	to the provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the obl	ite of Florida. Such chan	ge was authorized	by the corporati	poration submits this statement for the p ion's board of directors. I hereby accept	urpose of changing its the appointment as re-	registered gistered
SIGNATURE							
	Signature, typed or printed name of registered	agent and title if applicable	(NOTE: Registered	Agent signature require		DATE	
12.	OFFICERS	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF		
TITLE	D	∐ D	ELETE 1.1 TI	TLE		Change	Addition
NAME	REICH, THOMAS		12 N/	AME			
STREET ADDRESS	1407 BANYON CIRCLE		1.3 \$1	REET ADDRESS			
CITY-ST-ZIP	POMPANO BCH FL 33069			TY-ST-ZIP			
TITLE		□ D	ELETE 2.1 TI	TLE .		Change	☐ Addition
NAME			2.2 N	AME			
STREET ADDRESS			2.3 \$1	REET ADDRESS			}
CITY-ST-ZIP.			2.40	TTY-ST-ZIP			
TĪĪLE		□ D	ELETE 3.1 TI	TLE		Change	Addition
NAME			3.2 N	AME			
STREET ADDRESS			3.3 \$1	TREET ADORESS			
CITY-ST-ZIP			3.4. C	ITY-ST-ZIP			
TITLE		_ D	ELETE 4.1 TI	TLE		Change	Addition
NAME			4.2N	AME			1
STREET ADDRESS			4.3 ST	TREET ADDRESS			ł
CITY-ST-ZIP			4.4 CI	TY-ST-ZIP			
TITLE		0 □	ELETE 5.1 TI	TLE		Change	☐ Addition
NAME			52 N	AME			
STREET ADDRESS			5.3 \$1	TREET ADDRESS			l
CITY-ST-ZIP			5.4 CI	TY-ST-ZIP			
TITLE		D	ELETE 6.1 TI	TLE .		Change	Addition
NAME			6.2 N	AME Ì)
STREET ADDRESS			6.3 \$1	TREET ADDRESS			
CITY OF THE			64 C	TY-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:

THE TO BE