PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P98600648537V

Corporation Name

Accurate Consultants Corporation

May 13, 1999 8:00 am Secretary of State

05-13-1999 90032 010 \*\*\*150.00

4 9 2 4 2 \* 549242 - 90032 - 10

Principal Place		Mailing Address		
	ades Road, 203E	2300 Glades		
BocaRat	on, FL 33431	Boca Raton,	FL 334	DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				6/1/98
2. Principal Pla	ice of Business	2a. Mailing Address		4. FEI Number Applied For
	Slades Road	26 2300 Glades	Poad	65-0838928 Not Applicable
Suite Ant #		Suite, Apt. #, etc.	Road	\$8.75 Additional
20 3E		27 203E		5. Certificate of Status Desired  Fee Required
City & State 23 Boca R	aton, FL	City & State Boca Raton,	FL	6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible
24 33431	25 USA	29 33431 3	USA	Personal Property Tax. Yes XNo
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent				
John P. Fenner, Esq. 81 Name				
2300 G	lades Road, Suit	e 203E	82 Street	t Address (P.O. Box Number is Not Acceptable)
Boca Raton, FL 33431				
	• •		83	
	,		84 City	FI 85 Zip Code
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	Director	☐ DELETE	1.1 TITLE	Director Change XAddition
	John P. Fenner		1.2 NAME	John P. Fenner
STREET ADDRESS	2300 Glades Road	, Suite 203E	1.3 STREET ADDRESS	2300 Glades Road, Suite 203E
	Boca Raton, FL		1.4 CITY-ST-ZIP	Boca Raton, FL 33431
	Secretary	☐ DELETE	2.1 TITLE	Change Addition
l I	Erica Buckius		2.2 NAME	
l I	2300 Glades Road	Suite 203E	2.3 STREET ADDRESS	
	Boca Raton, FL		2. 4 CITY-ST-ZIP	
TITLE		☐ DELETE	31 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP		r	3.4. CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP		. <u></u>	5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	
14. I bereby cer	rtify that the information supplied with	this filing does not qualify for th	e exemption stated	d 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:

IGNATURE AND PEPEOOR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

CR2E034 (11/98)