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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000051339

ALTERNATIVE BENEFIT STRATEGIES GROUP, INC.

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	201	Suite Apt # etc.			 							Additiona
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		City & State	·			6. Flect	ion Cemp	aion Financ	cina -		\$5.0	O May Be
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	t Regis		1		1	0. Nam	e and Ad	dress of N	ew Reg	istered /	gent	
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ns of Sections our Joo. nt. or both, in the State	of Florid	or. 1506, Florida Statute: la. Such change was au	s, we abo thorized I	y the corp	oration's	board o	directors	i. I hereby a	ccept th	ne appoin	tmeni 83	registered
, and accept the obligat	tions of,	Section 607.0505, Flori	da Statut	S.								
				ent signature	required whe			ANCES TO	OFFIC		DIDECT	OPS IN 1
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	The state of the s	Country Cou	Since Guinn Hwy TAMPA FL 33625 2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State Country Zip 29 and Address of Current Registered Agent ROW G NY 5 Since of Sections 607,0502 and 607,1508, Florida Statute nt, or bolh, in the State of Florida. Such change was au n, and accept the obligations of, Section 607,0505, Florida	Single Gunn Hwy TAMPA FL 33625 2a. Mailing Address 26 Suita, Apt. #, etc. 27 City & State 29 30 Suita Address of Current Registered Agent ROW G NY Suita Address of Current Registered Agent 8 8 8 8 8 8 8 8 8 8 8 8 8	Suite, Apt. #, etc. 27 City & State Country Signature Agent Registered Agent ROW G NY Signature Agent Registered Agent 81 Name 82 Street 83 Street 84 City And accept the obligations of, Section 607.0505, Florida Statutes. (NOTE: Registared Agent signature OFFICERS AND DIRECTORS 13.	Suite, Apt. #, etc. 28	Mailing Address 51088 GUNN HWY TAMPA FL 33625 3. Date 06/6 28 2a. Mailing Address 4. FEIN 26 Suite, Apt. #, etc. 5. Certif City & State 6. Elect Trust Country 7 Zip 7 Country 8. This Personal Address of Current Registered Agent 10. Name ROW G WY 83 Street Address (P.O. But 84 City And accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submit, or both, in the State of Florida, Such change was authorized by the corporation's board of and accept the obligations of, Section 607.0505, Florida Statutes. Country 81 Name 82 Street Address (P.O. But 83 Street Address (P.O. But 84 City 85 Street Address (P.O. But 85 Street Address (P.O. But 86 City 87 Street Address (P.O. But 87 Street Address (P.O. But 88 Street Address (P.O. But 89 Street Address (P.O. But 80 Street Address (P.O. But 81 Street Address (P.O. But 82 Street Address (P.O. But 83 Street Address (P.O. But 84 City 85 Street Address (P.O. But 85 Street Address (P.O. But 86 Street Address (P.O. But 87 Street Address (P.O. But 88 Street Address (P.O. But 89 Street Address (P.O. But 80 Street Address (P.O. 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Box Number 83 Street Address (P.O. Box Number 84 City And accept the obligations of, Section 607.0505, Florida Statutes. Printed name of registered agent and title if applicable. (NOTE: Registance Agent signature required when reinstating) OFFICERS AND DIRECTORS 12 ADDITIONS/CH	Mailing Address \$1088 GUNN HWY TAMPA FL 33625 DO NOT 3. Data Incorporated or Qua 06/05/1998 4. FEI Number 26 Suite, Apt. #, etc. City & State Country Zip Country Zip Country Since Country And Address of Current Registered Agent Since Address of Current Registered Agent Name ROW G WY Since Of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for not only, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby a contract of registered agent and life if applicable. (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS DELETE 12 NAME POWLESS DORROW	Mailing Address 61086 GUNN HWY TAMPA FL 33625 DO NOT WRITE 3. Data incorporated or Qualified 06/05/1998 4. FEI Number 26 Suite, Apt. #, etc. City & State City & State Country Zip Country Zip Country B. This corporation owes the current Personal Property Tax. Ind Address of Current Registered Agent Name 80W G WY Sine of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purit, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the privated name of registered agent and gib if applicable. (NOTE: Registand Agent signature required when minutaring) OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICE	Mailing Address 51088 GUNN HWY TAMPA FL 33625 DO NOT WRITE IN THIS: 3. Date incorporated or Qualified 06/05/1998 4. FEI Number 59 - 351 6452 Suite, Apt. #, etc. 27 City & State City & State Country Zip Country Zip Country B. This corporation owes the current year Interpretation of Country Trust Fund Contribution Country Address of Current Registered Agent 10. Name and Address of New Registered Agent ROW G WY 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL and of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of cut, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appoint, and accept the obligations of, Section 607.0505, Florida Statutes. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 12. NAME POWLESS, PARROW G	Suite, Apt. #, etc. Suite, Apt. #, etc.

14. I hereby certify that the information supplied with this filing does not qualify for the examption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental abnual 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 their receiverpot rustige employeers to secure 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 in addition, with all other like empowered.

G OFFICER OR DIRECTOR

3.1 TITLE

32 NAME

4.1 TITLE

4. 2 NAME

5.1 TITLE

52 NAME

81 TIBE

67 NAME

3.3 STREET ADDRESS

4.3 STREET ADDRESS

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