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FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

COF	PROFIT RPORATION JAL REPORT 1999	FLORIDA DEPAR Katherin Secretary DIVISION OF CO	e Harri	•		FILED			
	MENT # P98000060	041				99 JUN 16 AM 9			
,	1. Corporation Name P T Consultation Systems, Inc.			SECRETARY OF STATE TALLAHASSEE, FLORIDA					
5-1	- 10	BA-W- A LA.				_}			
Principal Plac		Mailing Address	N 1						
7042 N.W. 10th Place 7042 N.W. 10th Place Gainesville, FL 32605									
	12120, 121 52005	04110071110, 11	3200	•		3. Date Incorporated or Qualifed	E IN THIS	SPACE	
		T 2 4 10				07/06/98		· · · · · ·	
2. Principal P	lace of Business	2a. Mailing Address				1		Applied For Not Applicable	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired			5 Additional Required
City & Stal	e	City & State				Election Campaign Financing Trust Fund Contribution		\$5.0	00 May Be
Zip	Country	Zip	Coun	try		8. This corporation owes the curre	nt year Inta	angible	_
24	9. Name and Address of Curre		30			Personal Property Tax. 10. Name and Address of New Ro	naletored (XYes	□No
Ph 1 C	. Beverly, Jr.	at registers Agent		B1 Nar	пe	10. Name and Address of New A	ağısteren i	Agent	
	E. 2nd Street		ļ.	R2 Sin	eel Addr	ess (P.O. Box Number is Not Acceptal	nle)		
	ville, FL 32601					000 (
				B3					
			Ī	B4 City	1		FI	85 Z	ip Code
11. Pursuant office or i	to the provisions of Sections 607.05 registered agent, or both, in the State	02 and 607.1508, Florida Statutes of Florida, Such change was aut	s, the ab	ove-nam	ned corp	oration submits this statement for the pon's board of directors. I hereby accept	surpose of the appoin	changing itment as	its registered
agent. I a SIGNATURE	m familiar with, and accept the oblig-	ations of, Section 607.0505, Florid	da Statut	es.	•	on's board of directors. I hereby accept	-,,		
	Signature, typed or printed name of registered age			gent signet	ure required	d when reinstating)	DATE	D DIDEO	7000 #140
12.	Director	ND DIRECTORS	13.	E	D4:	ADDITIONS/CHANGES TO OFF r./Pres./Secretary	ICERS AN	Chang	
NAME	James C. Moses		1.2 NAW	Æ		mes C. Moses		и .	
STREET ADDRESS	7042 N.W. 10th Plac	e	1.3 STR	EET ADORE		42 N.W. 10th Place			
CITY-ST-ZIP	Gainesville, FL 32	605	1.4 City	-ST-2IP		inesville, FL 32605			<u> </u>
TITLE NAME		☐ DELETE	2.1 TITL 2.2 NAM			r./Vice-Pres./Treasu	rer	☐ Chang	e 🖁 Addition
STREET ADDRESS					Re	becca H. Moses 38 S.E. County Road :	2112		
CITY-ST-ZIP			2.4 CIT	Y-ST-ZIP		lrose, FL 32666	216		
TITLE		☐ DELETE	3.1 TITL		Tie	500002:		Chang	e Addition
NAME			3.2 NAV	_		-06/25 _/	/990	a ra 1102-	-013
STREET ADDRESS CITY-ST-ZIP				EETADORI Y-ST-ZIP	200	****5	50.00 50.00	米米米米	550.00
TITLE		☐ DELETE	4.1 TITL					Chang	
NAME			4.2 NA	ME					
STREET ADDRESS				EET ADORE	ess (
CITY-ST-ZIP		☐ DELETE	5.1 TITL	<u>-st-zip</u> E	-			Chang	ne Addition
NAME			5.2 NAM		-				_
STREET ADDRESS			· ·	EET ADORE	SS				
CITY-ST-ZIP		TI DELETE	5.4 CITY 6.1 TITL	-ST-ZIP					
TITLE NAME		☐ DELETE	6.2 NAM					Lichand	(W) "BO
STREET ADDRESS				EET ADORE	ss			,	" NOV "
CITY-ST-ZIP				-ST-ZIP				(<i>yı</i> .
14. I hereby of indicated	certify that the information supplied w on this annual report or supplements	vith this filing does not qualify for t al annual report is true and accura	he exem ate and t	ption sta hat my s	aled in S ignature	section 119.07(3)(i), Florida Statutes. I shall have the same legal effect as if	further cert made unde	ify that th r oath; th	e information at I am an

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PROFIT



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1	UAL REPORT	1981 C	w Harris		
}	1999	Secretary DIVISION OF C			
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	JMENT #				
	Consultation S	ections Inc	_		
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}				1.	
Principal Pla	ce of Business	Mailing Address			
·		·		1	
			•		
				DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified	
				2/3//99	
2. Principal i	There of Husinapas	2a. Mailing Addines		4. FEI Nilliby Applied For	
21		26]		S9-3558723 Not Applica	
Sulte, Apl	. if. elg.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional	1
22	we Mrs. 10 Clipping compares of the Control of the	27)		Fee Required	
्यापुरु हे यात इ.स.	•	City & State		6. Election Campaign Financing \$5.00 May the	
Zip	Gomity	741 741	Grantey	Trust Fund Contribution Added to Foos 8. This corporation owes the current year intengitish	
24]	[25]	29 3		Personal Property Tax. Yes Tho	
	9. Name and Address of Current			10. Name and Address of New Registered Agent	
			81 Name	•	
			\$2 Street	Address (P.O. Box Number Is Not Acceptable)	ſ
			63	The state of the s	
				,	
			84 City	FL 88 Zip Code	_
11. Pursuani	to the provisions of Sections 607.0502	ajki 607 1508. Florida Statutos	. The above named o	Corporalism submits this statement for the purpose of character the constant	ā"
office or agairt. I i	aspinkend agent, or hom, in the Stale of An familiar with, and accept the obligation	Florida. Such change was aut vis of, Section 507,0505, Florid	horized by the corpo la Statules,	oration's board of directors. I hereby accept the appointment as registered	-
SIGNATURE					- 1
12	OFFICERS AND	·	nijklimist Apaul ubjustus in 13.	· · · · · · · · · · · · · · · · · · ·	<u>.</u>
12. • • • • • • • • • • • • • • • • • • •	1	LI DELETE	1.7 HILE	ADDITIONS (CHANGES TO OFFICERS AND DIRECTORS IN 12	
elasie	İ		17 NAME	Comp. Com	
SPHELAINAS:			1.3 STREET ADDITESS		
CITY ST 25°			LACITY: 67-79		
TITLE]	Phieren "	2.1 TITLE	[☐Change ☐ Add	dion
MANE	İ		22 NAME		- 1
Route Markets	1		23 STREET ADDRESS		
CIT-SI-A"		I. J DELETE	2.4 QIY-01-2P	Total Indiana	
RALE	İ	i.) UELETE	31 mm F 3.2 NAME	☐ Chamige	AKON
SHELL MACES	1		DESTRUCTIONS		- 1
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MILE	# ** * * * * * * * * * * * * * * * * *	∐ pere le	AT THUE	[] Charage [] Arki	ilion
IME	}		4.2 NAME	,	J
STORE LAIRBORS			4.75 MEET ACKRESS		ļ
CHY BI ZE	***************************************		44 gary 81 20 9	11 t be been	
HEF		LJ DELETE	51 mce	☐ Chringe ☐ Add	liçus
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CHAPPINES			53 STREET ANOREDS		- 1
CHY SI-JW		L) DELÈTE	81 101E	L]Change []Assi	
NAME.			#7HAN	Class	***
dimen wines			6.3 STREET APORTS		

44. Thereby spelify that the information supplied with this filling does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information lists alread on this arrant regard to many important remain regard is that such such that my signature shall have the same legal effect as it make under cutt, that I am an other or director of the successive or treatment in the regard in the regard of the such as controlled by Chapter 6th, I folds Statutes and that my name appears in that 2 or Block 13 it chapter, or one or other both with an address, with oil other tike mystered.

Presedent