## Feb 25, 1999 8:00 am Secretary of State

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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State

	1999 DIVISION OF CORPORATIONS						02-25-1999 90082 050 ***150.00				
DOCUMENT # P98000079269  1. Corporation Name  B.Y. CONSULTING, INC.							~_				
Principal Place of Business Mailing Address 8303 N.W. 36TH STREET CORAL SPRINGS FL 33065 CORAL SPRINGS FL 33065									VRITE IN THI		
						;	3. Date Incorp	orated or Quali		3 31 ACE	
Principal Place of Business 21			2a. Mailing Address 26				4. FEI Number	086593	7	Not	olied For Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.			- !	5. Certifcate o	f Status Desired	d· [2]	<b>\$8.75</b> A Fee Rec	quired
City & State			City & State  28  Zip Country				6. Election Campaign Financing Trust Fund Contribution  8. This corporation owes the current year Intangible.				
Zip 24	Count 25 9. Name and Addr	29 ess of Current Regis		30	ıy .		Personal Pr	ation owes the or roperty Tax. Address of Ne		€¥es	□No
F11 14	**	ess or ourroin riegi	, tot du rigotti	8	1 Name		<u> </u>	~			
FILINGS, INC. 3732 N.W. 16TH STREET FT. LAUDERDALE FL 33311-4132				8	2 Street	Address	(P.O. Box Nun	nber is Not Acc	eptable)		
FI.	LAUDERDALE FL 33	311-4132		8	3				•	,	
					4 City			<del></del>	FI	<b>-</b> ' '	
office or r	egistered agent, or hoth	n in the State of Flori	607.1508, Florida Statutes da. Such change was auf , Section 607.0505, Flori	tnorized b	v the como	l corporati oration's	ion submits this board of direct	s statement for ors. I hereby ac	the purpose o cept the appo	of changing its pintment as rec	registered pistered
SIGNATURE	Signature, typed or printed name	ne of registered agent and title	if applicable. (NOTE: F	Registered Ag	ent signature	required whe	an reinstating)		DATE		
12.		OFFICERS AND DIRI	ECTORS	13.			ADDITIONS/	CHANGES TO	OFFICERS A		
TITLE	D D	•	☐ DELETE		5/1	Trea	Surer +S	ecretary		Change	Addition
NAME STREET ADDRESS	YANCOSKIE, BERT 8303 N.W. 36TH STREET			1.2 NAME 1.3 STRE	E ET ADDRESS	730	OSKIP JO	34 5+. 35 FL 31	301aC		
CITY-ST-ZIP	CORAL SPRINGS	FL 33065	☐ DELETE	14 CITY-		ÇBr		32		☐ Change	. Addition
TITLE	a miner	,	□ bereie	2.1 TITLE						□ ourningo	
NAME STREET ADDRESS	1.21	•			- ET ADDRESS						
CITY-ST-ZIP		et py or seed		2. 4 CITY							
TITLE			DELETE	3.1 TITLE						☐ Change	Addition
NAME				3.2 NAME	=						
STREET ADDRESS				3.3 STRE	ET ADDRESS	:					
CITY-ST-ZIP				3.4. CITY				-		- Choose	Addition
TITLE			☐ DELETE	41 TITLE						Change	
NAME	İ			4, 2 NAM	ET ADDRESS						
STREET ADDRESS				4.4 CITY							
CITY-ST-ZIP TITLE			☐ DELETE	5.1 TITLE				-		Change	Addition
NAME				5.2 NAMI	E						
STREET ADDRESS				5.3 STRE	ET ADDRESS	:					
CITY-ST-ZIP		_		5.4 CITY-		ļ					
TITLE			☐ DELETE	6.1 TITLE						Change	☐ Addition
NAME				6.2 NAM							
STREET ADDRESS		•			ET ADDRESS						
CITY-ST-ZIP				6.4 CITY	-S1-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:

JRE AND TYPED OF RINTED NAME OF SIGNING OFFICER OR DIRECTOR

954-344-8256