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Secretary of State

03-02-1999 90071 017 \*\*\*150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P98000086923

1. Corporation Name  
PAR RETAIL CONSULTING, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business: 4280 SE 20TH PL.#806 CAPE CORAL FL 33904  
Mailing Address: 4280 SE 20TH PL.#806 CAPE CORAL FL 33904

3. Date Incorporated or Qualified  
10/08/1998

2. Principal Place of Business (21-24)  
2a. Mailing Address (26-30)

4. FEI Number: 65-0866747  
5. Certificate of Status Desired: \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees  
8. This corporation owes the current year Intangible Personal Property Tax: Yes

9. Name and Address of Current Registered Agent  
LEACH, RAY  
4280 SE 20TH PL.#806  
CAPE CORAL FL 33904

10. Name and Address of New Registered Agent (81-85)

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: \_\_\_\_\_ DATE: \_\_\_\_\_  
(NOTE: Registered Agent signature required when reinstating)

Table with 5 rows for Officers and Directors (12). Each row includes fields for Title, Name, Street Address, and City-ST-ZIP, with a 'DELETE' checkbox.

Table with 8 rows for Additions/Changes to Officers and Directors (13). Each row includes fields for Title, Name, Street Address, and City-ST-ZIP, with 'Change' and 'Addition' checkboxes.

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: *Ray Leach* RAY LEACH President 1/24/99 941 542 1773

CR2E034 (11/98)