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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## FILED May 08, 1999 8:00 am Secretary of State

05-08-1999 90053 010 \*\*\*150.00

1. Corporation	MENT # \$29880 NSULTING, INC.							
Principal Place of Business Mailing Address							DIBN BIBNI	DYBUT BIETT (BE)
11980 KESWICK WAY 4440 PGA BLVD.								
PALM BEACH GARDENS FL 33418 SUITE 103						DO MOT MIDITE IN THE OF	ACE	
US PALM BCH. GARDENS FL 334				410		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed		
						02/06/1991		
2 Principal Pl	ace of Business	2a Mailing	2a, Mailing Address			4. FEI Number	A	plied For
21	ace of Eddifficos	<u> </u>	26			65-0243539	No	t Applicable
Suite, Apt. 1	#, etc.		Suite, Apt. #, etc.				\$8.75	Additional
22					·	5. Certificate of Status Desired	Fee Re	equired-
City & State	3	City & State				6. Election Campaign Financing	\$5.00	- 1
23		28				Trust Fund Contribution Added to Fees		
Zip	Country	Zip	_	Country	у	8. This corporation owes the current year Intang	jible ] Yes	□No
24	25	29		<u>[0]</u>		Personal Property Tax.  10. Name and Address of New Registered Ag		
	9. Name and Address of Current	Registered A	gent	81	Name	10. Name and Address of New Registered Ag		
MAY, CYLESTE A								
4440 P.G.A. BLVD., SUITE 103				82	Street Add	lress (P.O. Box Number is Not Acceptable)		
PALM BEACH GARDENS FL 33410				83	3			
							a = 1 - 75 = 1	Ondo
				84	City	FL	85 Zip (	Code
office or re agent. I ar SIGNATURE	to the provisions of Sections 607.0500; adjistered agent, or both, in the State of m familiar with, and accept the obligat Signature, typed or printed name of registered agen	of Florida. Such ions of, Section	change was aut 607.0505, Florid	norized by ta Statute:	the corporati	poration submits this statement for the purpose of chion's board of directors. I hereby accept the appointned when reinstating)  DATE	ent as re	gistered
12.	OFFICERS AN	DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	P		☐ DELETE	1.1 TITLE		L	] Change	☐ Addition
NAME	GUDOIAN, RICHARD			1.2 NAME				
STREET ADDRESS	11980 KESWICK WAY			1.3 STREE	ET ADDRESS			
CITY-ST-ZIP	PALM BEACH GDNS. FL 33418			1.4 CITY-	ST-ZIP		Change	Addition
TITLE	\$		☐ DELETE	2.1 TITLE		L		
NAME	GUDOIAN, RICHARD			2.2 NAME	<u> </u>			
STREET ADDRESS	11980 KESWICK WAY	, <del></del>			T ADDRESS			
CITY-ST-ZIP	-PALM-BEACH-GDNS.FL 33418	<u> </u>	DELETE	2. 4 CITY- 3.1 TITLE	51-ZP		] Change	Addition
TITLE	gudoian, richard			3.2 NAME			•	
NAME	11980 KESWICK WAY				ET ADDRESS			}
STREET ADDRESS CITY-ST-ZIP	PALM BEACH GDNS. FL 33418	1		3.4. CITY-				
TITLE	THE DESCRIPTION OF TE OUT IC	·	DELETE	4.1 TITLE			Change	Addition
NAME				4. 2 NAME				
STREET ADDRESS				4.3 STREE	T ADDRESS			
CITY-ST-ZIP				4.4 CITY-	ST-ZIP			
TITLE			DELETE	5.1 TITLE		· · · · <u></u>	] Change	☐ Addition
NAME				5.2 NAME				
STREET ADDRESS				5.3 STREE	T ADDRESS			
CITY-ST-ZIP	***************************************	·		5.4 CITY-			706	
TITLE	•		☐ PELETE	6.1 TITLE			] Change	☐ Addition
NAME				6.2 NAME	1			
STREET ADDRESS				6.3 STREI	ET ADDRESS			

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #