SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

S74104

(8)

FOSTER CONSULTING ENTERPRISES, INC.

FILED Aug 12 1998 8:00am Secretary of State

Principal Place of Business Mailing Address						01814 01816 01811 01811 01811 E1811 E1811	
		3313 SAN CARLOS STREET CLEARWATER FL 34618-	* * * * * * * * * * * * * * * * * * * *				
					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
					08/15/1991		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For	
		26	t W ata		59-3084879	Not Applicable	
		Suite, Apt. #, etc.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State	├─ <b>┐</b> ´		6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees		
Zip 24 337	59 Country	zip 33759 3	Coun	try	This corporation owes or has paid the Personal Property Tax due June 30.	e current year Intangible	
	9. Name and Address of Curren		<u> </u>		10. Name and Address of New Regist		
FOSTER, JUDITH B. 81					е		
3313 SAN CARLOS STREET CLEARWATER FL 34618 33 759			\ 	32 Street Addr	ess (P.O. Box Number Is Not Acceptable)		
CLEARWATER FL 94618 32 727				13			
					PARTIE		
			1	34 City		FL 85 Zip Code	
office or	to the provisions of sections 607.050; registered agent, or both, in the State am familiar with, and accept the obligi	of Florida. Such change was aut	horized	by the corporation	ration submits this statement for the purpose on's board of directors. I hereby accept the	of changing its registered appointment as registered	
SIGNATURE							
	Signature, typed or printed name of registered agen	. <del></del>		d Agent signature requ		ATE	
12.	·····	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN 12	
TITLE	P	DELETE	1.1 TITU			Change Addition	
NAME	The Artist of the Control of the Con		1,2 NAM				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP	CLEARWATER FL ST		1.4 CITY				
TITLE		L DELETE	2.1 T(T)	- 1		Change Addition	
NAME	FO\$TER, C. NICHOLAS 3313 SAN CARLOS ST		2.2 NAM				
STREET ADDRESS	CLEARWATER FL			ET ADDRESS	w.v.	• .	
CITY-ST-ZIP TITLE	OLDANIATEN FL	Mos. sts	2.4 C/TY 3.1 TITL		·		
NAME		L DELETE	3.1 THE			Change Addition	
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP			3.4 CITY				
TITLE		DELETE	4.5 TITU			Danage A Addition	
NAME		L_J PECE IL	4.2 NAM			The same of the sa	
STREET ADDRESS				ET ADDRESS		1/2/11 \</td	
CITY-ST-ZIP			4.4 CITY			1110112	
TITLE		DELETE	5.1 TITL		<del></del>	Change Addition	
NAME		C 000010	5.2 NAM	E		/ change / Addition	
STREET ADORESS			E .	ET ADDRESS			
CITY-ST-ZIP			5.4 CITY	1			
TITLE		DELETE	6.1 TITLE			Change Addition	
NAME			6.2 NAM		600002617	6266°	
STREET ADDRESS				ET ADDRESS	<b>-08/17/98</b> 01069	005	
CITY-ST-ZIP			6.4 CITY	I	***150.00		
	edify that the Information symplied with	this filing does not qualify for the			ion 119 07(3)(i) Florida Statutes I further or	ortify that the information	

4. 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.

SIGNATURE:

WHITE BUSINER OUDING B. POSTER

4/30/98 727-325-3681

RZE034 (5/98)