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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # \$96727

P M R SEARCH CONSULTANTS, INC.

(0)

Mailing Address

FILED Apr 30 1997 8:00am Secretary of State



4298 OSCEOLA AVENUE JACKBONVILLE BEACH FL 32250		428B OSCEOLA AVENUE JACKSONVILLE BEACH FL 32250-4077							
					3. Date Incorporated or Qualified 3a. Date of Last Report 04/17/1996				
2. Principal Place of Business 21		2a. Mailing Address 26		4. FEI Number 59-3094102	Applied For Not Applicable				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		\$8.75 Additional Fee Required			
City & Stat	6	City & State			Election Campaign Financing Trust Fund Contribution			.00 May Be	
Zip 24	Country 25	7 ip 29	Countr 30	<i>y</i>		Yos [No	der s. 199.032,	
	9. Name and Address of Curr	ent Registered Agent		Ι.,	10. Name and Address of New Re	gistered /	Agent		
	JRTENSTEIN, PETER B.		81	Name					
212 - 33RD AVENUE SOUTH JACKSONVILLE BEACH FL 32250					ddress (P.O. Box Number is Not Acceptab	ess (P.O. Box Number is Not Acceptable)			
			83]					
			84	City		FI	85	Zip Code	
11. Pursuant	to the provisions of Sections 607.08	502 and 607.1508, Florida Stat	ules, the abov	o-named c	orporation submits this statement for the p	uroooo of	chang	ing ils registerer	
OHICH OF I	egistered agent, or both, in the Sta im familiar with, and accept the obli	te of Florida, Suco change was	s authorized b	v the cern	oration's board of directors. I hereby accep	the app	ointmer	nt as registered	
SIGNATURE		gamena or, cooper opriocoo, i	rioricia Okarato	0.					
	Signature, typed or printed name of registered a		O1E: Registered Ag	ent signature re	equired whom reinstating)	DATE			
12.	OFFICERS A	ND DIRECTORS	13.	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFIC	ERS AND			
TITLE	GURTENSTEIN, PETER B.	☐ DELETE	1.1 TDCF			-	Cha	inge 🔲 Additio	
NAME	3330 3 00EAN DR-		1.2 NAME		are as el are	ب . ن-	<i>)</i>		
STREET ADDRESS	JACKSONVILLE BCH FL				212-33 BLAVE, 3	5001	H		
CITY-ST-ZIP Title	VS	DELETE	1.4 CITY - 1	S1 - ZIP			<u> </u>		
NAME	ROSENBLUM, MARK	□ Dettie	2.1 TILLE				Cha	inge Addition	
STREET ADDRESS	1363 PLANTATION OAKS D)R	2.2 NAME 2.3 STREE	Abobtee					
CITY-ST-ZIP	JACKSONVILLE BCH FL	•••	2.4 CITY-						
TITLE		☐ OECETE	3.1 TOLE	21-711.			Cha	nge Additio	
NAME			3.2 NAME					a:	
STREET ADDRESS			3.3 STREET	ADDRESS					
CITY-ST-ZIP			34 CITY-	ſ					
TITLE		DELETE	4 1 THLE				☐ Cha	nge 🔲 Additio	
NAME			4 2 NAME						
STREET ADDRESS			4.3 STREET	ADDRESS					
CITY-ST-ZIP			4.4 CITY-5	1 · ZIP					
TITLE		DELETE	5.1 TITLE		- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Chai	nga 🔲 Additio	
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREET	ADDRESS					
CITY-ST-ZIP			5.4 CITY - S	1-ZIP					
TITLE		☐ DELETE	6.1 7111.6				Cha	nge Addition	
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREET	ADDRESS					
CITY-ST-ZIP			6.4 CHY- 9	1-712					

4. 1 do 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: /

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Polytop C

1/2/02

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