

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  
Apr 23, 1999 8:00 am  
Secretary of State

04-23-1999 90072 026 \*\*\*150.00

DOCUMENT # Y 57364 <sup>OK</sup>  
1. Corporation Name

SALES CONSULTANTS OF FT. LAUDERDALE, INC.

Principal Place of Business

Mailing Address

100 W. Cypress Creek Rd.  
Suite 880  
Ft. Lauderdale, FL 33309

100 W. Cypress Creek Rd.  
Suite 880  
Ft. Lauderdale, FL 33309

DO NOT WRITE IN THIS SPACE

33309 Incorporated or Qualified  
08/10/92

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

Applied For

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

65-0353205

Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

23 Zip Country

28 Zip Country

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

24 Zip Country

29 Zip Country

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Peterson, Glen O  
8314 SW 81st Terrace  
Miami, FL 33143

81 Name Peterson, Gregory G  
82 Street Address (P.O. Box Number is Not Acceptable)  
1950 NE 57th Street

83  
84 City Ft. Lauderdale, FL FL 85 33308

11. Pursuant to the provisions of Sections 607.0503 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 Glen O Peterson  
Signature, typed or printed name of registered agent and title if applicable.

GREGORY G. PETERSON  
(NOTE: Registered Agent signature required when reinstating)

4/16/99  
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE V ☐ DELETE  
NAME Peterson, Glen O  
STREET ADDRESS 8314 SW 81st Terrace  
CITY-ST-ZIP Miami, FL 33143

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE VDT ☐ DELETE  
NAME Taylor, Jeffrey A  
STREET ADDRESS 2880 NE 14th Street  
CITY-ST-ZIP Pompano Beach, FL 33062

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE VS ☐ DELETE  
NAME Peterson, Gregory G  
STREET ADDRESS 1950 NE 57th Street  
CITY-ST-ZIP Ft. Lauderdale, FL 33308

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-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: Glen O Peterson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/99  
Date

Daytime Phone #

CR2E034 (11/98)