

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 556222 (8)

1. Corporation Name
UNI-TROL SERVICE SYSTEMS, INC.



Principal Place of Business: 1316 N DIXIE HWY HOLLYWOOD FL 33020 US
Mailing Address: PO BOX 840805 PEMBROKE PINES FL 33084 US

3. Date Incorporated or Qualified: 12/13/1977
3a. Date of Last Report: 04/24/1995
4. FEI Number: 59-1798183
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 has liability for intangible tax under s 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21. 2011 Johnson Street, Suite #, etc.:
22. City & State: 23. Hollywood FL 3
24. Zip: 33020, 25. Country: Broward, 29. Zip: 30. Country:

9. Name and Address of Current Registered Agent: HERNANDEZ, ARMAND, 1316 N DIXIE HWY, HOLLYWOOD FL 33020
10. Name and Address of New Registered Agent: 81. Name: HERNANDEZ, ARMAND, 82. Street Address: 2011 Johnson Street, 83. City: Hollywood, FL, 84. Zip Code: 33020

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: [Signature] DATE: 4-19-96

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: PD	NAME: HERNANDEZ, ARMAND	1.1 TITLE: PD	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
STREET ADDRESS: 1316 N DIXIE HWY	CITY-ST-ZIP: HOLLYWOOD FL	1.2 NAME: Hernandez, Armand	
		1.3 STREET ADDRESS: 2011 Johnson Street	
		1.4 CITY-ST-ZIP: HOLLYWOOD FL	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE: [] DELETE	NAME: [] DELETE	2.1 TITLE: [] CHANGE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE: [] DELETE	NAME: [] DELETE	2.2 NAME: [] CHANGE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE: [] DELETE	NAME: [] DELETE	2.3 STREET ADDRESS: [] CHANGE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE: [] DELETE	NAME: [] DELETE	2.4 CITY-ST-ZIP: [] CHANGE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE: [] DELETE	NAME: [] DELETE	3.1 TITLE: [] CHANGE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE: [] DELETE	NAME: [] DELETE	3.2 NAME: [] CHANGE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE: [] DELETE	NAME: [] DELETE	3.3 STREET ADDRESS: [] CHANGE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE: [] DELETE	NAME: [] DELETE	3.4 CITY-ST-ZIP: [] CHANGE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE: [] DELETE	NAME: [] DELETE	4.1 TITLE: [] CHANGE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE: [] DELETE	NAME: [] DELETE	4.2 NAME: [] CHANGE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE: [] DELETE	NAME: [] DELETE	4.3 STREET ADDRESS: [] CHANGE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE: [] DELETE	NAME: [] DELETE	4.4 CITY-ST-ZIP: [] CHANGE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE: [] DELETE	NAME: [] DELETE	5.1 TITLE: [] CHANGE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE: [] DELETE	NAME: [] DELETE	5.2 NAME: [] CHANGE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE: [] DELETE	NAME: [] DELETE	5.3 STREET ADDRESS: [] CHANGE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE: [] DELETE	NAME: [] DELETE	5.4 CITY-ST-ZIP: [] CHANGE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE: [] DELETE	NAME: [] DELETE	6.1 TITLE: [] CHANGE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE: [] DELETE	NAME: [] DELETE	6.2 NAME: [] CHANGE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE: [] DELETE	NAME: [] DELETE	6.3 STREET ADDRESS: [] CHANGE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE: [] DELETE	NAME: [] DELETE	6.4 CITY-ST-ZIP: [] CHANGE	Change <input type="checkbox"/> Addition <input type="checkbox"/>

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: [Signature] ARMAND HERNANDEZ, President DATE: 4-19-96 DISTRICT PHONE #: 957-915-0999

CR2E034 (12/95)