

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **G59539** (8)

1. Corporation Name

**FRANCISE MANAGEMENT SERVICES, INC.**



Principal Place of Business

Mailing Address

802 W. HAINES ST.  
PLANT CITY FL 33566  
US

802 W HAINES ST  
PLANT CITY FL 33566  
US

3. Date Incorporated or Qualified  
**09/14/1983**

3a. Date of Last Report  
**03/20/1995**

2. Principal Place of Business

2a. Mailing Address

21 802 W Dr ML King Jr. Blvd

26 802 W Dr ML King Jr. Blvd

4. FEI Number

**59-2325789**

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 #D

27 #D

5. Certificate of Status Desired

\$8.75 Additional Fee Required

City & State

City & State

23 Plant City, Florida

28 Plant City, Florida

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

Zip

Country

Zip

Country

24 33566

25 United States

29 33566

30 United States

8. This corporation has liability for intangible tax under s 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FRANCISE, NAHEEM M., II  
802 W. HAINES ST.  
PLANT CITY FL 33566

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

802 W. Dr. ML King Jr Blvd Suite #D

83

84 City

Plant City

FL

85 Zip Code

33566

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
PVP	FRANCISE, NAHEEM	802 W. HAINES ST.	PLANT CITY FL	<input type="checkbox"/>
ST	FRANCISE, NAHEEM	802 W. HAINES ST.	PLANT CITY FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
		802 W. Dr. ML King Jr Blvd Suite #D	Plant City, Florida 33566	<input checked="" type="checkbox"/>
		802 W. Dr ML King Jr Blvd Suite #D	Plant City, Florida 33566	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<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: *Naheem M. Fran*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12-19-95 813-229-6677

Date Daytime Phone #

CR2E034 (12/95)