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

PROFIT
CORPORATION
ANNUAL REPORT
1997

Principal Place of Business

4396 INDEPENDENCE COURT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G71752

(1)

Mailing Address
4396 INDEPENDENCE CT

AM/PM SERVICE GROUP, INC.

FILED									
May 01 1997	8:00am								
Secretary of	State								

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SARASOTA FL US	34234	SARASOTA FL 34234-4711 US							
						3. Date Incorporated or Qualified 11/30/1983		te of Last F 15/1996	Report
	Place of Business	2a. Mailing Address				4. FEI Number		——————————————————————————————————————	pplied For
21		26				59-2357038			ot Applicable
Suite, Apt. 22	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		•	Additional equired
City & Stat	e	City & State				Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip	Country	Zip	Cour	ntry		8. This corporation has liability for i	ntangible		
24	25	29	30				Yes [
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Re	gistered A	igent	
	NS, JAMES M			81	Name				
	S INDEPENDENCE COURT			82	Street Add	ress (P.O. Box Number is Not Acceptab	le)		
SAR	ASOTA FL 34234		-	83					
			ľ	83					
				84	City		FI	85 Zip	Code
11. Pursuant	to the provisions of Sections 607 0503	and 607 1609 Florida Statu	lor the ab	046	named cor	poration submits this statement for the o		phonoical	to registered
office or r agent. I a	registered agent, or both, in the State is am familiar with, and accept the obliga	of Florida. Such change was alterns of, Section 607.0505, Fi	authorized lorida Statu	l by Jles	the corpora 3.	poration submits this statement for the p ition's board of directors. I hereby accep	it the appo	ointment as	registered
SIGNATURE	Signature, typed or printed name of registered agen	n and title if applicable (NO)	It: Registered	Age	n: signature requ	ired when reinstating)	DATE		
12.	OFFICERS AND	····	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	RS IN 12
TITLE	VTD	☐ DELETE	1.1 111	LE.				Change	Addition
NAME	EVANS, JAMES M		1.2 NAI	ME					
STREET ADDRESS	4396 INDEPENDENCE COURT		1.3 ST	ŧ£E1	ADDRESS				
CiTY-ST-ZIP	SARASOTA FL		1.4 CIT		T - 71P				
TITLE	PD IAMES S	☐ DELETE	2.1 1111					☐ Change	Addition
NAME OTOSET 1000500	EVANS, JAMES C. 4396 INDEPENDENCE COURT		2.2 NAI						
STREET ADDRESS	SARASOTA FL				ADDRESS				
CITY-ST-ZIP TITLE	D	DELETE	2 4 CI		51 - 218			Churine	Addition
NAME	EVANS, VIVIENNE C.		3.2 NAI					~ (``````````````	\
STREET ADDRESS	R. R. 1 BOX 182A				ADDRESS				W///
CITY-ST-ZIP	SYRACUSE IN		3 4, 01					•	$\langle \rangle \rangle \rangle \rangle$
TITLE	VSD	DELETE	41 111					Change	Addition
NAME	EVANS, JON C		4 2 NA	ME					
STREET ADDRESS	4396 INDEPENDENCE COURT		4 3 51	REET	ADDRESS				
CITY-ST-ZIP	SARASOTA FL		4 4 CH	Y-S	T-ZIP				
TITLE	D	DELETE	51111	LE	[80000218	4O	Change	Addition
NAME	EVANS, VIVIENNE C		5.2 NAI	ME		60000216 -05/05/970100	12D?	₹8 -	
STREET ADDRESS	4396 INDEPENDENCE COURT		5 3 514	KE (F I	ADDRESS	***165.00	raus Baffa		
CITY-ST-ZIP	SARASOTA FL	Document	5 4 CH						
TITLE		☐ DELETE	6.1 TITE			/D		☐ Change	Addition
NAME			6.2 NA		7	INDAL, STEVEN L. 396 INDEPENDENC			
STREET ADDRESS					ADDRESS 4	396 INDEPENDENC TARAGOTA FL. 34:2	E CO	URT	
City-St-7IP			64.00	Y . 91	1.7IP e.3	AKA90TA FL 34.2	10-		

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 Statules. 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 Laman 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 of Block 13 if changed, or on an attachment with an address.