

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNTY DUE TO REINSTATE: \$375)**

PROFIT CORPORATION ANNUAL REPORT 1995



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

DOCUMENT # J98358 (1)
1. Corporation Name
FLORIDA SERVICE BUREAU, INC.

FILED
95 JUL -5 AM 9:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business: **C/O ORVILLE SCHWARTZ 16811 NE 6 AVE N MIAMI BCH FL 33162 US**
Mailing Address: **C/O ORVILLE SCHWARTZ 16811 NE 6 AVE N MIAMI BCH FL 33162 US**

2. Previous Place of Business: **21**
2a. Mailing Address: **26**
3. Date of Last Report: **03/09/1994**
4. FID Number: **65-0018961**
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Has the corporation been dissolved? \$5.00 May Be Added to Fees
7. Has the corporation been merged? Florida Statutes Yes No

9. Name and Address of Current Registered Agent:
**SCHWARTZ, ORVILLE
16811 NE 6 AVE
N MIAMI BCH FL 33162**

3a. Date of Last Report: **03/09/1994**
4. FID Number: **65-0018961**
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Has the corporation been dissolved? \$5.00 May Be Added to Fees
7. Has the corporation been merged? Florida Statutes Yes No
10. Name and Address of New Registered Agent:
81. Name:
82. Street Address (P.O. Box Number is Not Acceptable):
83.
84. City: **FL** 85. Zip Code:

11. Pursuant to the provisions of Sections 607.0602 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 aware with my appointment of the obligations of Section 607.0605, Florida Statutes.
SIGNATURE: *Orville Schwartz* *Orville Schwartz* 6/28/95

12. OFFICERS AND DIRECTORS		13.	
12.1 NAME: DP SCHWARTZ, ORVILLE 12.1 STREET ADDRESS: 16811 NE 6 AVE N MIAMI BCH FL	12.2 NAME: ST SCHWARTZ, ELLEN 12.2 STREET ADDRESS: 16811 NE 6 AVE N MIAMI BCH FL	13.1 1. NAME: 1.1 STREET ADDRESS: 1.1 CITY, ST, ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.3 NAME: 12.3 STREET ADDRESS: 12.3 CITY, ST, ZIP:	12.4 NAME: 12.4 STREET ADDRESS: 12.4 CITY, ST, ZIP:	13.2 2. NAME: 2.1 STREET ADDRESS: 2.1 CITY, ST, ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.5 NAME: 12.5 STREET ADDRESS: 12.5 CITY, ST, ZIP:	12.6 NAME: 12.6 STREET ADDRESS: 12.6 CITY, ST, ZIP:	13.3 3. NAME: 3.1 STREET ADDRESS: 3.1 CITY, ST, ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.7 NAME: 12.7 STREET ADDRESS: 12.7 CITY, ST, ZIP:	12.8 NAME: 12.8 STREET ADDRESS: 12.8 CITY, ST, ZIP:	13.4 4. NAME: 4.1 STREET ADDRESS: 4.1 CITY, ST, ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.9 NAME: 12.9 STREET ADDRESS: 12.9 CITY, ST, ZIP:	12.10 NAME: 12.10 STREET ADDRESS: 12.10 CITY, ST, ZIP:	13.5 5. NAME: 5.1 STREET ADDRESS: 5.1 CITY, ST, ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.11 NAME: 12.11 STREET ADDRESS: 12.11 CITY, ST, ZIP:	12.12 NAME: 12.12 STREET ADDRESS: 12.12 CITY, ST, ZIP:	13.6 6. NAME: 6.1 STREET ADDRESS: 6.1 CITY, ST, ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I certify that the information reported on this form is voluntarily furnished and does not qualify for the exemption stated in Sections 119.07(4) by Florida Statutes. I further certify that the information reported on this form is true and correct to the best of my knowledge and belief, and that the information reported on this form is true and correct to the best of my knowledge and belief, and that the information reported on this form is true and correct to the best of my knowledge and belief, and that the information reported on this form is true and correct to the best of my knowledge and belief.
SIGNATURE: *Orville Schwartz* PRES 6/28/95 505-855-1001

CR2E034 (3/95)