SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000089715 (2)

CADD P	PRO SERVICES, INC.				
Principal Plac	e of Business	Mailing Address			
OLADEO BUILDING: SUITE 303 B77-ENEOUTIVE-GENTER DRIVE WEST ST. PETERODURO FL 82702		OLADEO BUILDINO: OUITE 600 - 877 EXECUTIVE CENTER DRIVE WEST 67. PETEROBURO FL 82702		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified 10/31/1996	3a. Date of Last Report
21 3932	Nace of Business VENSHUES OL.	T T T T T T T T T T	Anues of.	4. FEI Number 59 - 3409 025	Applied For Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	JA, RL	City & State	fr.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24 ? 36	34 25 USA	Zip 33634 3	Country SA	This corporation owes or has pa Personal Property Tax due June	30. De Yes No
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Re	gistered Agent
MASCARA, ERNEST L 81					
GLADES BUILDING, SUITE 303 877 EXECUTIVE CENTER DRIVE WEST				dress (P.O. Box Number is Not Acceptab	le)
ST.	PETERSBURG FL 33702		83		
			84 City	·	FL 85 Zip Code
11. Pursuant office or r agent. I a	to the provisions of Sections 607.0502 registered agent, or both, in the State of mailiar with, and accept the obligations of the section of	and 607.1508, Florida Statutes of Florida. Such change was aut jons of, Section 607.0505, Florid	the above-named of horized by the corpo da Statutes.	orporation submits this statement for the p ration's board of directors. I hereby accep	urpose of changing its registered of the appointment as registered
GIGHATORE	Signature, typed or printed name of registered agent	and tille if applicable. (NOTE: F	legistered Agent signature re	quired when reinstating)	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	VPD	K KDELETE		PD	Change K Addition
NAME	MASCARA, ERNEST L	·urot		Stephen Hahn	
STREET ADDRESS	877 EXECUTIVE CENTER DRIVE	: ME21		3932 Versailles Dri	
CITY-ST-ZIP	ST. PETERSBURG FL 33702	☐ DELETE		<u> Pampa, Florida 3363</u>	4 ☐ Change ☐ Addition
TITLE			2.1 TITLE		Change C Adoliton
NAME			2.2 NAME		
STREET ADDRESS City-St-Zip			2.3 STREET ADDRESS		
TITLE		DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - S1 - ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		}

14. I do 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.

SIGNATURE:

Slephen Hahn, President

8)7/97

FILED

Aug 12 1997 8:00am

Secretary of State

813-86-9100