

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

FILED
Mar 30 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000002980 (5)
 1. Corporation Name
PICO SERVICES, INC.



Principal Place of Business 702 FARMERS MARKET ROAD FT. PIERCE FL 34982	Mailing Address 702 FARMERS MARKET ROAD FT. PIERCE FL 34982
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DO NOT WRITE IN THIS SPACE

21 Principal Place of Business	22 Suite, Apt. #, etc.	23 City & State	24 Zip	25 Country	26 Mailing Address	27 Suite, Apt. #, etc.	28 City & State	29 Zip	30 Country
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3. Date Incorporated or Qualified 01/06/1997	
4. FEI Number 65-0718243	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
PEARCE, TIMOTHY J
4098 COCOPLUM CIRCLE
COCONUT CREEK FL 33063

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable) 702 FARMERS MARKET RD.	
83	
84 City Ft. PIERCE	85 Zip Code FL 34982

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: *Timothy J. Pearce* **PRESIDENT** **3/22/98**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	D <input type="checkbox"/> DELETE
NAME	PEARCE, TIMOTHY H
STREET ADDRESS	4098 COCOPLUM CIRCLE
CITY-ST-ZIP	COCONUT CREEK FL 33063
TITLE	D <input type="checkbox"/> DELETE
NAME	PEARCE, MARTHA M
STREET ADDRESS	4098 COCOPLUM CIRCLE
CITY-ST-ZIP	COCONUT CREEK FL 33063
TITLE	D <input type="checkbox"/> DELETE
NAME	PECK, WILLIAM T
STREET ADDRESS	1828 RIDGEWOOD CIRCLE
CITY-ST-ZIP	SOUTH BEND IN 48617
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	P PEARCE, TIMOTHY J.
1.3 STREET ADDRESS	702 Farmers Market Rd.
1.4 CITY-ST-ZIP	Ft. Pierce, FL 34982
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	S PEARCE, MARTHA M.
2.3 STREET ADDRESS	1966 16th Ave. SW
2.4 CITY-ST-ZIP	Vero Beach, FL 32962
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	T PECK, WILLIAM T.
3.3 STREET ADDRESS	NO CHANGE
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I 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: *Timothy J. Pearce* **TIMOTHY J. PEARCE** **3/21/98** **561-468-0211**

CR2E034 (10/97)