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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Apr 02 1998 8:00am

Secretary of State

954

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000073804 (1)

PASADENA BUSINESS SERVICES, INC.

Principal Place of Business Mailing Address						
135-81 NORT SUITE 102	THWEST 6TH STREET PINES FL 33028	135-81 NO SUITE 102	135-81 NORTHWEST 8TH STREET SUITE 102 PEMBROKE PINES FL 33028			DO NOT WRITE IN THIS SPACE
				-		3. Date Incorporated or Qualified 08/26/1997
2. Principal Place of Business 2a. Mailing			Address			4. FEI Number Applied For
21		— <u> </u>	26			65-0777217 Not Applicable
I Suite, Apt.	#, etc.		Suite, Apt. #, etc.			SR 75 Additional
22		27	27			5. Certificate of Status Desired Fee Required
City & Stat	ө	Cily & S	City & State			6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip 24	p Country Zip 25 29		30	Country 30		8. This corporation owes or has paid the current year Intengible Personal Property Tax due June 30.
	9. Name and Address o	f Current Registered Ag	ent			10. Name and Address of New Registered Agent
AN AN	MERÎLAWYER CHARTEREI	D		81	Name	
343 ALMERIA AVENUE CORAL GABLES FL 33134				82	Street Ad	ddress (P.O. Box Number is Not Acceptable)
~	STAL CADELO I E 00 104			83		
				84	City	FL 85 Zip Code
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		- ··- 				
12.	Signature, typed or printed name of reg	gistered agont and title if applicable FRS AND DIRECTORS	(NOTE: R	lagratered Age	nt signature re	oquired when (elinetating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PSTD		DELETÉ	1.1 TITLE		Change Addition
NAME	AMERICO, ANTHONY			1.2 NAME		
STREET ADDRESS 135-81 NW 6TH ST, STE 102			1.3 STREET ADDRESS		ADDRESS	
CITY-ST-ZIP	PEMBROKE PINES FL	. 33028		1.4 CITY-SI		
TITLE			DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME				2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		ADDRESS	
CITY-ST-ZIP				2. 4 CITY - S	T-ZIP	
TITLE	E		DELETE 3.1 TIT			Change Addition
NAME				3.2 NAME	1	
STREET ADDRESS				3.3 STREET	ADDRESS	
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NAME Street address				5.2 NAME 5.3 STREET	Inneree	
1			İ			
CITY-ST-ZIP TITLE			DELETE	5.4 CITY-ST 6.1 TITLE	- 217	☐ Change ☐ Addition
NAME		-		6.2 NAME		
STREET ADDRESS				6.3 STREET	ADDRESS	İ
STILL NOUTLOS				0.0 0 INCCL	DOILOS	

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 of 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 deceiver or trustor 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 adjustment with an addices.