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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000044754 (5)

SERVISION CORPORATION

Principal Place of Business Mailing Address 9824 NE FIFTH AVENUE ROAD MIAMI SHORES FL 33138 9824 NE FIFTI AVENUE ROAD MIAMI SHORES FL 33138 GCO NE 98 457 DO NOT WRITE IN THIS SPACE Date Incorporated or Qualified MiamiShow Fl. 83188 05/20/1996 2a. Mailing Address Applied For NOT APPLICABLE 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5, Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Zω Country 8. This corporation owes or has paid the current year Intangible Yes 24 Personal Property Tax due June 30. 25 29 30 g, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name SHAMEL, C. RICHARD JR. 212 N. FEDERAL HIGHWAY Street Address (P.O. Box Number is Not Acceptable) **DEERFIELD BEACH FL 33441** 83 Zip Code 84 City 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 Signature, typod or printed name of registured agent and title if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE 1 I TITLE Change NAME WESTON, MICHAEL M. 12 NAME STREET ADDRESS 9824 NE FIFTH AVENUE ROAD 1.3 STREET ADDRESS MIAMI SHORES FL 33138 CITY-ST-ZIP 1.4 CITY - ST- 7IP DELETE 21 TITLE Change Addition TITLE SHAMEL, C. RICHARD JR. 2.2 NAME 212 N. FEDERAL HIGHWAY STREET ADDRESS 2.3 STREET ADDRESS **DEERFIELD BEACH FL 33441** CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition TITLE 31 TITLE STOKESBERRY, JOHN L. NAME 3.2 NAME 9500 S. DADELAND BLVD., #400 STREET ADDRESS 3 3 STREET ADDRESS **MIAMI FL 33156** 3 4. CITY-ST-ZIP CITY - ST - ZIP ☐ DELETE Change \_\_\_ Addition TITLE 41 TITLE 4 2 NAME MALIF 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY - ST - ZIP DELETE ☐ Change Addition 5.1 TITLE TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 61 TITLE Change Addition TITLE

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

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

NAME STREET ADDRESS

305 499-2014

FILED

May 12 1998 8:00am

Secretary of State