FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCU 1. Corporation	MENT # 41250	D1	(9)						
, , , ,	NART BUSINESS SERVICES	SINC	• • •						
Principal Place of Business Mailing Address									ili (1991) (1991) (1991) 1991
1224 RIDGEWOOD AVENUE VENICE FL 34292			1224 RIDGEWOOD AVENUE VENICE FL 34292						
							3. Date Incorporated or Qualified	3a. Date of La	ist Report
2. Principal Pl	lace of Business	20	Mailing Address				11/09/1972 4. FEI Number	05/0	1/1995
21		26	Washing Address						Applied For Not Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				59-1423666	_ \$6	3.75 Additional
22 27							5. Certificate of Status Desired	1 1 7 7	Fee Required
City & State			City & State				Election Campaign Financing Trust Fund Contribution		5.00 May Be
Z(p	Country 25	29	Zip	30	Country		8. This corporation has liability for in Florida Statutes Yes	itangible tax und	
	9. Name and Address of Currer	nt Registe	ered Agent	1901			10. Name and Address of New Re		i
					81	Name			,
BALES, RICHARD W.				82	Street A	ddress (P.O. Box Number is Not Acceptable	9)		
3128 NOVUS STREET SARASOTA FL 34237					83				
0/11/410	50 IN 7 E 04201				84	City		les.	Zip Code
	·					•		FL 85	'
 Pursuant t or register 	to the provisions of Sections 607.0502 red agent, or both, in the State of Flori	2 and 607 da. Such	.1508, Florida Statute change was authorize	es, the a ed by th	bove-r e corp	amed cor oration's b	poration submits this statement for the purpoard of directors. I hereby accept the appoi	ose of changing	its registered office
tamiliar wit SIGNATURE	th, and accept the obligations of, Sect	ion 607.0	505, Florida Statutes.				•		area again. , ann
	Signature, typed or printed name of registered agent		<u> </u>	It. Registe	red Agen	l signature red	uired when reinstating)	DATE	
12.	OFFICERS AN	D DIRECT		13		Т	ADDITIONS/CHANGES TO OFFIC		
NAME	PD PIOLUPE		DELETE		1 TITLE			☐ Cha	nge
STREET ADDRESS	BALES, RICAHRD				2 NAME	4000000			
CITY-SI-ZIP	3128 NOVUS ST SARASOTA, FL 00000				1.3 STREET ADDRESS 1.4 CITY - ST - ZIP				
TITLE			DELETE	2 1 TITLE		1-21		☐ Cha	nge: Addition
NAME	MACINTYRE, SANDRA R.		_	22 NAME					.g
STREET ADDRESS	2708 SERPULA RD.			23	STREET	ADDRESS			
CITY-ST-ZIP	VENICE FL.			24	CITY-S	- ZIP			
TITLE	STD	010		3	3 1 TITLE			☐ Cha	ng: Addition
NAME	CALLO, DOMAN 6.		2 NAME						
STREET ADDRESS	3128 NOVUS STREET					ADDRESS			
City-St-7iP Title	SARASOTA FL		DELETE		CITY-SI 1 TITLE	-ZIP		F-1 7	
NAME			L. J DELENE		NAME			☐ Chai	nge
STREET ADDRESS					STREET.	ADDRESS			
CITY-S1-ZIP					CITY-\$1				
TITLE			DELETE		1 TITLE			☐ Char	ng: Addition
NAME				5.2	NAME	-		_	
STREET ADDRESS				5.3	STREET	ADDRESS			
CITY-SF-ZIP					CITY-SI	-219			
TITLE			☐ DELETE	6 1	1 TITLE			☐ Char	nge 🔲 Addition
NAME					NAME	-			
STREET ADDRESS					STREET				
14. I do hereby	l y certify that the information supplied v	vith this fil	ing is voluntarily furnis		d does		y for the exemption stated in Section 110.0	7(2)(k) Florida Ca	ot doe 15 dhaa

Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 pranged, or on an attachment with an address.

GNATURE:

| Continue Process
| Continue P

SIGNATURE: