FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

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

DOCUMENT # 498598 **(2)**

1. Corporation Name

KARI SERVICES, INC.

Principal Place of Business	Mailing Address
5402 BEAUMONT CENTER BLVD #102 TAMPA FL 33634-2292	5402 BEAUMONT CENTER BLVD #102 TAMPA FL 33634-2292

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

3. Date Incorporated or Qualified: 03/10/1976
3a. Date of Last Report: 03/02/1995
4. FEI Number: 36-2862256 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

HEUER, MARTIN
5402 BEAUMONT CENTER BLVD #102
TAMPA FL 33634-2292

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
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
Signature, typed or printed name of registered agent and title if applicable — DATE

12. OFFICERS AND DIRECTORS

TITLE	SVD	☐ DELETE
NAME	HEUER, RITA M	
STREET ADDRESS	5402 BEAUMONT CTR #102	
CITY-ST-ZIP	TAMPA, FL 00000	
TITLE	PDT	☐ DELETE
NAME	HEUER, MARTIN	
STREET ADDRESS	5402 BEAUMONT CTR #102	
CITY-ST-ZIP	TAMPA, FL 00000	
TITLE	D	☐ DELETE
NAME	VAN VORIS, JOHN I	
STREET ADDRESS	501 E. KENNEDY BLVD.	
CITY-ST-ZIP	TAMPA, FL 00000	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☒ Change ☒ Addition
1.2 NAME		
1.3 STREET ADDRESS	CTR BLVD # 102	
1.4 CITY-ST-ZIP	33634	
2.1 TITLE		☒ Change ☒ Addition
2.2 NAME		
2.3 STREET ADDRESS	BLVD	
2.4 CITY-ST-ZIP	33634	
3.1 TITLE		☒ Change ☒ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP	33601	
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

CR2E034 (12/95)

14. I do 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 changed, or on an attachment with an address.

SIGNATURE: Martin Heuer — 3-6-96 — 813-884-0555
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #