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

630916 DOCUMENT #

(5)

SUB-TERRANEAN STABILIZATION SERVICES, INC. Principal Place of Business Mailing Address 3400 SW 11 ST 3400 SW 11 ST DEERFIELD BCH FL 33442 DEERFIELD BCH FL 33442 3. Date Incorporated or Qualified 4. FEI Number 2. Principal Place of Business 2a. Mailing Address 21 26 Suite, Apt. #. etc. Suite, Apt. #, etc.

\$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State 6. Election Campaign Financing City & State \$5.00 May Be Trust Fund Contribution 28 Added to Fees 23 Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032, Zφ Florida Statutes Yes No 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name TERWILLIGER, GARY A Street Address (P.O. Box Number is Not Acceptable) 82 3400 SW 11 ST 83 **DEERFIELD BCH FL 33442**

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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

84 City

12.	OFFICERS AND DIRECTORS		13.	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
ME	PT	☐ DELETE	1 1 TITLE		Change	Addition
AM:	TERWILLIGER, GARY A		1.2 NAME			
IREFT ADDRESS	3400 SW 11 ST		13 STREET ADDRESS			
11Y - \$1 - 7#	DEERFIELD BCH FL		14 CITY - ST - ZIP			
HLF	S	DELETE	2 1 TITLE		☐ Change	Addition
AME	HYE, THERËSA M.	•	2.2 NAME	Peters, Alice A.		
STREET ADDRESS	3400 SW 11TH. STREET		23 STREET ADDRESS	3400 S.W. 11th Stree	t	
71Y - \$1 - 779	DEERFIELD BEACH FL		2.4 CHY-ST-ZIP	Deerfield Beach, Fl		
TEF		DELETE	3 1 TITLE	•	☐ Change	☐ Addition
AM:			3 2 NAME			
THEFT ADDRESS			3.3 STREET ADDRESS			
1Y-\$1-7iP			3.4 CITY - ST-ZIP			
IILE		DELETE	4 1 TITLE		Change	Addition
IAME			4.2 NAME			
TREET ADDRESS			4 3 STREET ADDRESS			
ITY-S'-7P			4.4 C(1) Y - ST - Z(P			
i L f		☐ DELETE	5 1 TITLE		Change	Addition
IAME			5.2 NAME			
STREET ADDRESS			5 3 STREET ADORESS			
)1°¥+\$1+ 7 (₽			5.4 CITY-ST-ZIP			
lite		☐ DELETE	6 1 TITLE		Change	Addition
NAME			6.2 NAME			
STHEET ADDRESS			6.3 STREET ADDRESS			
CHY-ST ZIP			6 4 CITY-ST-ZIP			

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 oatr, 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 3 if changed, or on ay attachment with an address. appears in Block 12 or Block or on an attachment with an address.

SIGNATURE

ED OR DAINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/14/96 954-428-8555

07/26/1979

59-1965852

3a. Date of Last Report

02/03/1995

Applied For

Zip Code

85

Not Applicable