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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 04 1997 8:00am

Secretary of State

A CONTRA DITOR TRADE COMO MARCO CONTRA C

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # 638683

CHIY-ST-ZIP

(3)

ACTION MOBILITY PRODUCTS AND SERVICES, INC.

Principal Place of Business Mailing Address							TABLI MYALI ALBIT ALBI	; B1811 W	Met chat
1925 10TH AV		1925 10TH AVE N LAKE WORTH FL 33461	1925 10TH AVE N LAKE WORTH FL 33461-3309						
						3. Date Incorporated or Qualified 09/28/1979	3a. Date of L		porl
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number Applied For			lied For
21	_	26	26			<b>59-1949292</b> Not Applicat			Applicable
Surte, Apt.	#, etc	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional			
22		27	\$ -1 -4			Fee Required			
City & State	e	City & State	City & State			6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution Added to Fees			
Zip	Country	Zip	·	intry		8. This corporation has liability for in		der s.	199.032,
24	25	[29]	30				Yes No		
	9. Name and Address of Curr	ent Registered Agent		B1 Na	ame	10. Name and Address of New Re	Jisterea Agent		
BATELAAN, DONNA				101	arne				
	5 10TH AVE N				reet Addre	Address (P.O. Box Number is Not Acceptable)			
LAKE WORTH, FL									
334	61			83					
				84 Ci	ty		<b>—.</b> 85	Zip C	ode
				<u>ļl</u>			FL "	<del></del>	
office or r	egistered agent, or both, in the Sta	ite of Florida. Such change was	authorize	d by the	med corporation	oration submits this statement for the p on's board of directors. I hereby accep	urpose of chang If the appointme	ing its Int as r	registered ealstered
agent. La	rn familiar with, and accept the obl	igations of, Section 607.0505, F	Iorida Sta	tutes.	- •				-9
SIGNATURE	<u> </u>								
	Separate Type for printed name of registered	· · · · · · · · · · · · · · · · · · ·		d Agent sig	Inature require	ed when reinslating)	DATE		10.40
12.	PD	ND DIRECTORS  DELETE	13. 1.1 J	(T) <b>C</b>	····-	ADDITIONS/CHANGES TO OFFIC	Chi		Addition
	BATELAAN, DONNA M				}			arigo	L YOURINI I
NAME	1925 10TH AVE N			1.2 NAME					
STREET ADORESS	LAKE WORTH FL			1.3 STREET ADDRESS					
CITY-ST ZIP	D	DELETE		ITY - ST - ZIF	<u></u>		Chi	ange	Addition
TIDLE	BATELANN, DAVID	LJ DEEE TE	1	21 TITLE				ungo	- Nodition
NAME	1925 10TH AVE N			2.2 NAME					
STREET ADDRESS	LAKE WORTH, FL 00000		. I	2.3 STREET ADDRESS					
CHY-S1-767 Title	DARE WORTH, TE 0000	DELETE		2. 4 CITY-ST-ZIP 3.1 TITLE		·····	☐ Chi	апле	Addition
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STREET ADDRESS				TREET ADD	1				
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NAME		precit		NAME				- igo	
	1				nroc				
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CITY - ST - ZIF TITLE	<u>,</u>	☐ DELETE	5.1 T	ITY-\$T-ZIF	<u> </u>	,	Ch	ianne	Addition
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STREET ADDRESS			1	TREET ADD	1				
CITY-ST-ZIP		☐ DELETE		ITY - ST - ZIF	<u> </u>		☐ Ch		Addition
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NAME			-	IAME					
STREEL ADDRESS			635	TREET ADD	HESS				

6.4 CITY - ST - ZIP

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