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Apr 24 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # 659908 (8)
1. Corporation Name
FIRST TRUST SERVICES, INC.



Principal Place of Business Mailing Address
680 S FEDERAL HWY 680 S FEDERAL HWY
100 100
POMPANO BEACH FL 33062 LIGHTHOUSE PT FL 33074
US US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address
21 641 NE 26 CT 26 641 NE 26 CT
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 City & State 27 City & State
23 Pompano Beach, FL. 28 Pompano Beach, FL
24 Zip 25 Country 29 Zip 30 Country
33064 Broward 33064 Broward

3. Date Incorporated or Qualified
03/20/1980
4. FEI Number Applied For
59-1988620 Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required
6. Election Campaign Financing \$5.00 May Be
Trust Fund Contribution ☐ Added to Fees
8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
MOORE, LOREN
680 S FEDERAL HWY
SUITE 100
POMPANO BEACH FL 33062
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
641 NE 26 CT
83
84 City
Pompano Beach, FL FL 85 Zip Code
33064

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 Loren E. Moore

Signature, typed or printed name of registered agent and title if applicable

(NOT Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DVP	1.1 TITLE	DTVP
NAME	HALL, ROBERT T	1.2 NAME	
STREET ADDRESS	1981 NE 34TH COURT, APT A	1.3 STREET ADDRESS	
CITY-ST-ZIP	LIGHTHOUSE PT FL	1.4 CITY-ST-ZIP	33064
TITLE	PST	2.1 TITLE	PS
NAME	MOORE, LOREN	2.2 NAME	
STREET ADDRESS	680 S FEDERAL HWY SUITE 100	2.3 STREET ADDRESS	641 NE 26 CT
CITY-ST-ZIP	POMPANO BEACH FL	2.4 CITY-ST-ZIP	33064
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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.

SIGNATURE Robert T. Hall

CR2E034 (10/97)