## 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

**DOCUMENT #** 

F25002

(9)

ASSOCIATED BUILDING INSPECTORS AND APPRAISERS, I NC.

Principal Place of Business

Mailing Address

11476 W SAMPLE RD CORAL SPRINGS FL 33065

11476 W SAMPLE RD CORAL SPRINGS FL 33065



					}	3. Date Incorporated or Qualified	3a, Date			
						03/12/1981 04/27/1995			1995	
2. Principal Pia 21	ce of Business	_2a. Mailing Address 26	2a. Mailing Address			4. FEI Number 59-2087353	Number         Applied For <b>59-2087353</b> Not Applicable			
Suite, Apt. #	, etc.	Suite, Apt. #, etc.	<u></u>			5. Certificate of Status Desired S8.75 Additional Fee Regulred				
Orty & State		City & State	1			Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zgi 24	Country 25	Ζ <sub>[</sub> ρ	Country 30			8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No				
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New R		gent	· · · · · · · · · · · · · · · · · · ·	
			8	11	Name				***************************************	
MOSS,		6	82 Street Address (P.O. Box Number is Not Acceptable)							
	W SAMPLE RD SPRINGS FL 33065		83							
			8	4	City		FI	85 Z	p 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 -	ignature typical or printed name of registered ages:	: and the Lappinshie (NO:	TE: Registered Aç	gent	signature required wh	en reinstahing)	DATE			
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFI	CERS AND [	DIRECTO	ORS IN 12	
Tif:E	DP	☐ DELETE	1. 1 TITL	1. 1 TITLE				Change	Addition	
NAME	MOSS, KENNETH N.		1.2 NAME						_	
STREET ADDRESS			1.3 STRE	1.3 STREET ADDRESS					-	
CITY - ST - ZIP	CORAL SPRINGS FL		1.4 CIT		- ZIP					
TITLE	ST	DELETE	2 1 1111			· · · · · · · · · · · · · · · · · · ·	П	Change	Addition	
NAME	MOSS, RHEA		2.2 NAMI	E			_			
STREET ADDRESS	11111 NW 26 DR.		2.3 STBE	2 3 STREET ADDRESS						
C/TY - ST - 7%	CORAL SPRGS FL		2 4 CITY							
THE			3 1 TITLE				Change	Addition		
NAME	☐ DEFEIE		3.2 NAM	3 2 NAME						
STREET ADDRESS					ADDRESS					
C(1) S1 - Z(P)			3.4 CHTY							
THEF	☐ DEL ETE			4 1 TITLE				Change	Addition	
NAME			4.2 NAMI		ļ		b.s.d	· · · · · · · · · · · · · · · · · · ·		
SCREET ADOPESS			4.3 STRE		IUUBESS					
CITY-ST-2IP			4.4 CITY							
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NAME			5 2 NAME				ليا	onange	☐ ×oonton	
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CHTY-ST-ZIP TITLE		☐ DELETE	5 4 C(TY)		· ZIP			Change	Addition	
NAME		L best it			1		Ц	Change	☐ Addition	
			6.2 NAME							
STREET ANDRESS			6 3 STRE						}	
14 Lda baseby	ced to that the information supplied	with this files is not estable from	6 4 CITY		-ZIP	no occupation state 2 100 miles				

4. 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 cath; that I arman 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

Kenneth W Moss 2/21/96 954-345-8388

BIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

NO. 55 2/21/96 954-345-8388

2F034 (12/95)