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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Şandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

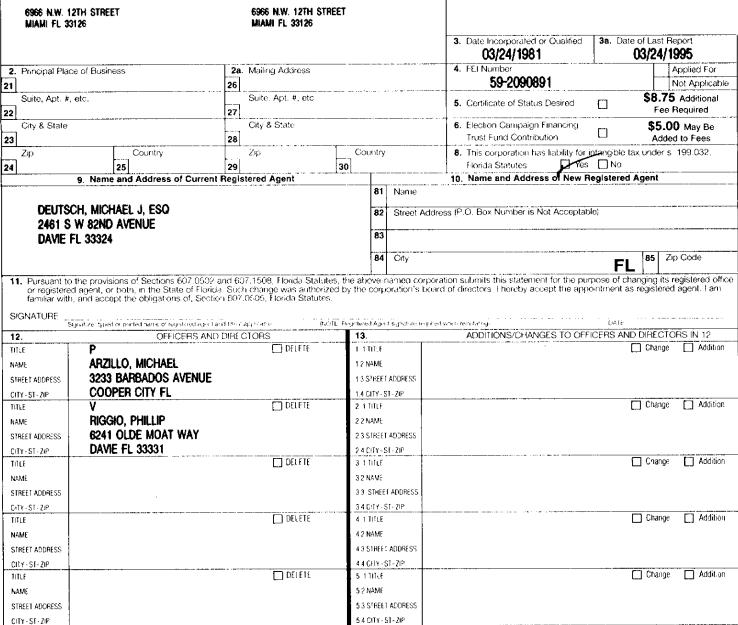
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Principal Place of Business

Mailing Address



14. Ido 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 command or the receiver structure employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes of the command of the c

6 1 TITLE

6.2 NAME

6.3 STREET ADDRESS

€ 4 CITY - ST - ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

NING OFFICER OR DIRECTOR

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Change

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