

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

FILED

Feb 11 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 # F92000000761 (8)

1. Corporation Name

FAMILY MEDIATION SERVICES, INC.

Principal Place of Business

211 MASSBURY ST
#200
GAITHERSBURG MD 20878
US

Mailing Address

211 MASSBURY ST
#200
GAITHERSBURG MD 20878
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/03/1992

4. FEI Number

52-1807456

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30.

Yes No

2. Principal Place of Business

21 Suite, Apt #, etc

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt #, etc

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

GOLDBERG, MAX M
10300 WEST BAY HARBOR DR.
#68
BAY HARBOR ISLANDS FL 33154

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

11 TITLE

NAME
STREET ADDRESS
CITY- ST- ZIP

12 TITLE

NAME
STREET ADDRESS
CITY- ST- ZIP

13 TITLE

NAME
STREET ADDRESS
CITY- ST- ZIP

14 TITLE

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STREET ADDRESS
CITY- ST- ZIP

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STREET ADDRESS
CITY- ST- ZIP

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NAME
STREET ADDRESS
CITY- ST- ZIP

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NAME
STREET ADDRESS
CITY- ST- ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 Change Addition

12 Change Addition

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SIGNATURE:

2-3-98 301-947-0500

CR2E034 (10/97)