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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9700002561 (5)

ACCESS RESOURCE SERVICES, INC.

FILED May 14 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							I ledités un auto sain sain sain sain sain sain sain sain
	2455 SUNRISE BLVD., 11TH FL 2455 SUNRISE BLVD., 11TH FL						
FORT LAUDERDALE FL 33304			FORT LA	FORT LAUDERDALE FL 33304			DO NOT WRITE IN THIS SPACE
							3. Date Incorporated or Qualified
							05/14/1997
2.	Principal Pla	ace of Business	2a. Mailin	a Address			4. FEI Number Applied For
21	¬			•			APPLIED FOR Not Applicable
= -1	Suite, Apt. #, etc.			Suite, Apt. #, etc.			\$8.75 Additional
22							5. Certificate of Status Desired Fee Required
	City & State	City & State City & State					6. Election Campaign Financing \$5.00 May Be
23			28				Trust Fund Contribution Added to Fees
_	Zip	Country	Zip		Country	,	8. This corporation owes or has paid the current year Intangible
24		[25]	[29]	30	ار		Personal Properly Tax due June 30. Yes No
_		9, Name and Address of Cu			81	Name	10. Name and Address of New Registered Agent
		RASTATE REGISTERED AGE		אכ	61	IVATIO	'
	701 BRICKELL AVENUE, STE 3000 AMIAMI FL 33131				82	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 protect is size of tensional transferred agree and telle if applicable (NOT) Registered Agent signature required when reinstating) DATE							
12			AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITE	.E	PSTD		DELETE	11 THILE		Change Addition
NAM	AE	STOLZ, PETER			1.2 NAME		
STR	EET ADDRESS	2455 SUNRISE BLVD., 11	TH FL		1,3 STREET	ADDRESS	
CIT	Y-ST-ZIP	FORT LAUDERDALE FL			1.4 CITY - S	T-ZIP	
TATL	.E	D		DELETE	2.1 TITLE		☐ Change ☐ Addition
NAA	AE [Re der, Steven			2.2 NAME	[
STR	EET ADDRESS	2455 SUNRISE BLVD., 11	TH FL		2.3 STREET	ADDRESS	·
CITY	Y-ST-ZIP	FORT LAUDERDALE FL			2. 4 CITY - 5	31- <i>Z</i> IP	
TITL	.E 【	D		DELETE	3.1 TITLE		☐ Change ☐ Addition
NAA	AE	UNDSEY, THOMAS			3.2 NAME	}	
STR	EET ADDRESS	2455 SUNRISE BLVD., 11	TH FL		3 3 STREET	ADDRESS	
CITY	Y-ST-ZIP	FO RT LAUDERDALE FL			3.4. CITY - 5	ST - ZIP	
TITL	E T			DELETE	4.1 TITLE		☐ Change ☐ Addition
NAN	AE				4. 2 NAME		
STR	EET ADORESS				4.3 STREET	ADDRESS	
cm	r-ST-ZIP				4.4 City - S	7 - Z IP	
TITL	E Ţ			☐ DELETE	5.1 TITLE		Change
NAM	AE			į	5.2 NAME) \(\frac{1}{2} \)
STR	EET ADDRESS				5.3 STREET	ADDRESS	7/19
CITY	-ST-ZIP				54 CITY-S	T - ZiP	J.,
TITL	.E			DELETE	6 1 TITLE		Change Addition
NAM	AE]				6.2 NAME		500002527005 -05/18/9801041040
STR	EET ADDRESS				6.3 STREET	ADDRESS	1401
CITY	1-ST-ZIP				6.4 CITY-S	7 - ZIP	***150.00
4.5		and the same of th	1 20 00 00	100			

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 Supplied ental annual report is frue 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 of the receiver or Lestone 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 point an extraction with an address.

PETER STOLZ