

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **G42410** (2)

1. Corporation Name

D.R.S. PUBLICATIONS INC.



Principal Place of Business

**611 ATLANTIC BLVD. EXT.
POMPANO BEACH FL 33069**

Mailing Address

**611 ATLANTIC BLVD. EXT.
POMPANO BEACH FL 33069**

2. Principal Place of Business

21 State, Apt., etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 State, Apt., etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified
06/07/1983

3a. Date of Last Report
02/27/1995

4. FEI Number
59-2332868

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**SNYDER, GERALD M.
611 ATLANTIC BLVD. EXT.
POMPANO BEACH FL 33069**

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 607.0503, Florida Statutes.

SIGNATURE

Signature of Registered Agent (if not the same as the corporation's)

Signature of Registered Agent (if not the same as the corporation's)

DATE

12. OFFICERS AND DIRECTORS

11a. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**PTD
SNYDER, GERALD M.
1571 SW 13TH DR.
BOCA RATON FL**

☐ DELETE

11b. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**VPS
SNYDER, LINDA R.
1571 SW 13TH DRIVE
BOCA RATON FL**

☐ DELETE

11c. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

11d. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

11e. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

11f. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-STATE-ZIP

2. TITLE

22 NAME

23 STREET ADDRESS

24 CITY-STATE-ZIP

3. TITLE

32 NAME

33 STREET ADDRESS

34 CITY-STATE-ZIP

4. TITLE

42 NAME

43 STREET ADDRESS

44 CITY-STATE-ZIP

5. TITLE

52 NAME

53 STREET ADDRESS

54 CITY-STATE-ZIP

6. TITLE

62 NAME

63 STREET ADDRESS

64 CITY-STATE-ZIP

14. 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 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 or changed, or on an attachment with an address.

SIGNATURE:

Linda R. Snyder
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/13/96
DATE

407-392-5491
TELEPHONE #

CR2E034 (12/95)