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PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name H11136

(9)

AMMEDIATE C-P & S, INC.

1 (\$\$1\$11 BIB1 11981 HIDE	I SKROD GILIO BULL	31811 81611 6161t 1881

Principal Place of Business Mailing Address											
316 N.W. 20TH STREET WILTON MANORS FL 33311			316 N.W. 20TH STREET WILTON MANORS FL 33311								
							3.	Date Incorporated or Qualified 06/28/1984	3a. Dat	e of Last 5/01/1	
2. Principal Pla	ice of Business	2a. Mailing Address					4.	FEI Number			Applied For
21		26						43-0961144			Not Applicable
Suite, Apt. #	r, etc.	Suite Apt. #, etc.					5.	Certificate of Status Desired			75 Additional ee Required
City & State		City & State					6.	Election Campaign Financing			.00 May Be
23		28						Trust Fund Contribution			ded to Fees
Zıp	Country	Zip	Cou	ntry				This corporation has liability for i	_	ax under	rs 199.032,
24	25	29	30					Flonda Statutes 🔲 Yes			
	9. Name and Address of Curren	t Registered Agent		81	Nai		10.	Name and Address of New R	egisterea	Agent	
	100 M. L. C.			6'							
H.M ERMELING 316 NW 20TH ST				82	Str	eet Address	(P.0	Box Number is Not Acceptab	le)		
	DERDALE FL 33311			83							
11. 1.	DENDALE IE SOOTT									· 12.71	
				84	City	у			FL	85	Zip Code
or registere familiar wit	o the provisions of Sections 607.0502 ed agent, or both, in the State of Floric h, and accept the obligations of, Sect	da. Such change was auth ion 607.0505, Florida Stat.	orized by the c utes.	corps	oratio	on's board o	of dir	rectors. Thereby accept the appo	pose or cr pintment a	s register	red agent. I am
12.	Signature, typed or pended na recollegistered agent OFFICERS ANI		INDE Registered	A-Jer	(5-94a	(afe responded) who		ADDITIONS/CHANGES TO OFF		D DIREC	TORS IN 12
TITLE	EVPS	DELETE	1 1 7	TLE	•			7,0011010-01211020-10-017		Charic	
NAME	ERMELING, HELEN M.	_	1.2 N/	AME							
STREET ADDRESS	316 NW 20TH ST		13 SI	REET	ADDRI	LSS					
CHY-ST-ZIP	FT. LAUDERDALE FL		14CI	TY-S	T-ZP						
TITLE	PT	☐ DELETE	2 ! T	l³L F						☐ Chang	ge 🔲 Addition
NAME	ERMELING, WM. K		2.2 Na	AME							
STREET ADDRESS	316 NW 20TH ST		2.3.51	REET	ADORI	ESS					
CITY - ST - ZIP	FT LAUD FL	F1 profes			II - ZIP			4.4.4.4.4.		Chang	n
TITLE		DELETÉ	3 1 I							L. Grani	ge 🔲 Addition
NAME CIRCLI ADDRESS			32N-		T ACOR	ecc.					
STREET ADDRESS CITY-ST-ZIP					: AGOR	10.33					
TITLE		DELETE	4 1 [Chang	ge 🔲 Addition
NAME		_	4 2 N	AME							
STREET ADDRESS			43S	TREE!	ADDE	ESS					
CITY-ST-ZIP			440	IY-S	T - ZIP						
TITLE		DELETE	5 1 T	ITLE						Chan	ge 🔲 Addition
NAME			5 2 N	AMÉ							
STREET ADDRESS			5 3 S	IRELI	ADDR	ESS					
CITY-ST-ZIP		Floriere			1 - 7(P					Char	an D Addition
TITLE		☐ DELETE	6 1 7	_						☐ Chan	ge 🔛 Addition
NAME			62 N								
STREET ADDRESS			- 6		ADDR	:22					
City-St-ZiP	v certify that the information supplied	with this filling is voluntarily			s not	L : qualify fo : tl	he e	exemption stated in Section 119	07(3)(k). F	lorida Sta	atutes. I further

rice nereby certify that the information supplied with this raining is voluntarily turnished and does not quality to the exemption stated in Section 1.19.07(5)(k), Florida Statutes. Truffler 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 eath; 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 if changed, or on an artischment with an address. 4/20/96

TOTAL OF SIGNAG OFFICER OF DIRECTOR

SIGNATURE: 2

934-363-0696 Daylane Prome 1