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

FLORIDA DEPARTMENT OF STATE

PROFIT

Apr 23 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT** # (9) K02035 FREDRIC P. SERVICES, INC. Mailing Address Principal Place of Business 8095 CHATUGA CT. 8095 CHATUGA CT. LAKE WORTH FL 33467 LAKE WORTH FL 33467 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/09/1987 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 26 12640 58th PLACE NORTH 12690 58TH PLACE NOATH 65-0013665 Not Applicable Suite Apt # etc Royal FL. \$8.75 Additional Royan PALM BEACH, FL 5. Certificate of Status Desired Fee Required \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 8. This corporation owes or has paid the current year Intangible X Yes Personal Property Tax due June 30. 24 25 10. Name and Address of New Registered Agent Name and Address of Current Registered Agent B1 Name SMODISH, MICHAEL P. 1101 NORTH CONGRESS AVENUE **B2** Street Address (P.O. Box Number is Not Acceptable) SUITE 200 83 **BOYNTON BEACH FL 33436** 84 City 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change Addition THILE PETROV, JEFFREY 1.2 NAME NAME 12640 58 Th PLACE N.
Roym from BEACH, FL 6095 CHATUGA CT. 1.3 STREET ADDRESS STREET ADDRESS LAKE WORTH FL 1.4 CITY - ST - ZIP CITY - ST - ZIP Change 2.1 TITLE TULE PETROV, SUSAN 22 NAME NAME 8095 CHATUGA CT. 12690 SBA RACE N. 2 3 STREET ADDRESS STREET ADDRESS 2 4 CHY-S1-ZIP CITY-S1-ZIP Change Addition 3 t TiTLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3 4. CHY-ST-ZIP CHY-ST-ZIP Addition Channe DELETE 4 1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CHY-ST-ZIP Addition DELETE TITLE 5.1300 € 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY - ST - ZIP ___ Addition DELETE TITLE 61 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS 14. Thereby certily 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 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 if changed, or on an attachment with an address

JEFFRENF, PESRON

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