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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K15266

(5)

COLLECTIONS INTERNATIONAL, INC.

FILED
Apr 08 1997 8:00am
Secretary of State

Principal Place of Business Mailing Address						T TABLETT THE THE THIRD CAND ONLY OUT STATE STATE COUNTY OF THE STATE ST				
% CYNTHIA S.		% CYNTHIA S. EISAMAN	14541 SW 94 LANE							
14541 SW 94 ( MIAMI FL 3318		14541 SW 94 LANE MIAMI FL 33186-1045								
_					3. Date Incorporated or Qualified 02/12/1988		Date of Last Report 4/25/1996			
2. Principal P	lace of Business	2a. Mailing Address 26			4. FEI Number 65-0028143		Applied For Not Applicable			
Suite, Apt	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	X	\$8.75 Additional Fee Required			
City & State 23	0	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution  Added to Fees				
Zip	Country	Zip	Country			B. This corporation has liability for	ntangible t			
24	25	29	30			Florida Statutes				
	9. Name and Address of Curre	nt Registered Agent	1	<u> </u>		10. Name and Address of New Re	gistereti A	gent		
	AMAN, CYNTHIA S.			81	Name					
	41 SW 94 LANE MI FL 33188		8:			ess (P.O. Box Number is Not Acceptab	le)			
				83						
				1	City		FL		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, speed or printed name of registered agent and tills if applicable. (NOTE Registered Agent signature required when reinstating)  DATE  DATE										
12.	OFFICERS AND DIRECTORS					ADDITIONS/CHANGES TO OFFICE	ERS AND	DIRECTOR	S IN 12	
TITLE	PVS	☐ DELETE	1.1 10	TLE				Change	Addition	
NAME	EISAMAN, CYNTHIA S.		1.2 NA	ME					,	
STREET ADDRESS	14541 SW 94 LN			REET A	DORESS				}	
CHTY - ST - 2IF				TY-ST-	ZIP		<del></del>			
TITLE	TD DELETE		2.1 TITLE		}		l	Change	Addition	
NAME	EISAMAN, CYNTHIA S.			2.2 NAME						
STREET ADDRESS	14541 SW 94 LN MIAMI FL		2.3 STREET ADDRESS  2. 4 City+St-Zip							
CHY-SI-ZIP HILE	MUNMI FL	DELETE	2.4 C		- ZIP			Change	Addition	
NAME S	Decrie		•	32 NAME			,	Onlange	71001.1011	
STREET ADDRESS					nneess					
CITY - \$1 - 7IP				3.3 STREET ADDRESS 3.4. CITY-ST-ZIP						
TITLE			4.1 Ti				Ţ	Change	Addition	
NAME:			4. 2 N	4. 2 NAME				**	[	
STREET ADDRESS			4.3 ST	REET A	DDRESS					
CITY+ST-7IP			4.4 CI	4.4 CITY-ST-ZIP						
TITLE		DELETE	5.1 Tr			•		Change	Addition	
NAMÉ			5.2 NA	ME		. The state of the				
STREET ADORESS			5.3 ST	REET A	ODRESS					
CITY-SI-ZIP			5.4 CI	TY-\$T-	ZIP					
TITLE		☐ DELETE	6.1 TO	TLE				Change	Addition	
NAME			6.2 NA	ME		•				
STREET ADDRESS			6.3 ST	REET A	DDRESS					
CITY-ST-ZIP				1Y-81-	- ZIP					

14. I do 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 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.

SIGNATURE: