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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

	1996 🔌	DIVISION (OF CORPORATIONS			
DOCUI . Corporation	MENT # L252	288 (6)				
	SERVICES, INC.					
*****	02/11/020/ 1110/			A ARABIRA BAR MARA BAMA AMBAN AMBAN A	NIA 1811 ALAH AKAN ANAN	BIEN AMBIL AMBIL KIE
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305 ALLISO 251 MAITLA	DN AVE. AND AVE., SUITE 216	305 ALLISON AVE. 230 LOOKOUT PLA	ACE STE AND			
LONGWOO	D FL 32750-6306	LONGWOOD FL 32				
U\$		US		 Date Incorporated or Qualified 10/19/1989 	3a. Date of Last	
	ace of Business	2a. Mailing Address		4. FEI Number	03/28/	
	Allison Ave.	<u> </u>	son Ave.	59-2978507		Applied For Not Applicable
Suite, Apt. #	ŧ, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	58.7	5 Additional
City & State		City & State			_ LJ Fee	Required
í	wood, FL	28 Longue 200	O EL	6. Election Campaign Financing Trust Fund Contribution		00 May Be
Zip 🔾	Country	Zip J	Country	This corporation has liability for	Add	ed to Fees
32750-1		29 32750-6306	30 ()	Florida Statutes 🔀 Yes	□ No	3 100.002,
	9. Name and Address of Cur	rrent Hegistered Agent	81 Name	10. Name and Address of New R	egistered Agent	
SCHOO	DNOVER, LINDA D. PA					
390 ST	ATE ROAD 434 W.		82 Street Add	dress (P.O. Box Number is Not Acceptab	le)	
STE 20			83		····	
LONGV	VOOD FL 32750		84 City			
			Day City		FL 85 Z	ip Code
familiar with SNATHER	n, and accept the obligations of, S	ection 607.0505, Florida Statute	Ites, the above-named corporation's boaties.	oration submits this statement for the pur ard of directors. I hereby accept the appr		registered office d agent. I am
famil ar with	n, and accept the obligations of, S Squature typed or protect name of registered a OFFICERS.	gent and title if applicable (A) AND DIRECTORS	utes, the above-named corporation's books. Oit Registered Agent signature require 13.	and or birectors. Thereby accept the appo	pose of changing its post of changing its postered	d agent. I am
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SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/28/96 (407)831-9658
Deptine Prone