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

CORPORATION ANNUAL REPORT

1997

Principal Place of Business

% MICHAEL E. SIMPSON



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M98606

(0)

Mailing Address

MICHAEL E. SIMPSON

MULTHEXPRESS SERVICES, INC.

Secretary of State									
Date Incorporated or Qualified 09/15/1988	3a. Date of Last Report 05/01/1996								
FEI Number 59-2906815		App	olied For Applicable						
Certificate of Status Desired	<u></u>	Fee Rec	quired						
Election Campaign Financing Trust Fund Contribution	<u> </u>	5.00 i Added to	Fees						
This corporation has liability for in Florida Statutes	Yes 🗌 No	5	199.032,						
. Name and Address of New Reg	lstered Ager	<u> </u>		}					
P.O. Box Number is Not Acceptable	9)		778.24	1					

	FL 85	Zip C	781						
on submits this statement for the publication of directors. I hereby accept	rpose of cha the appointn	nging its nent as r	registered egistered						
n reinstating)	DATE	FATARA		یا					
ADDITIONS/CHANGES TO OFFICE		ECTORS Change	Addition	CR2F034 (9/96)					
		Change	Addition	S					

FILED

Apr 17 1997 8:00am

PINELLAS PARK FL 34585		PINELLAS PARK FL 33781-1580				
					 Date Incorporated or Qualified 09/15/1988 	3a. Date of Last Report 05/01/1996
2. Principal F	Place of Business	2a. Mailing Address		***************************************	4. FEI Number	Applied For
21		26			59-2906815	Not Applicable
Suite, Apt.	. #, etc.	Suite, Apt #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & Stat	te	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Coun	ту	8. This corporation has liability for in	
24	25	29	30		Florida Statutes • Z	Yes No
	9. Name and Address of Curr	ent Registered Agent		· Y · · · · · · · · · · · · · · · · · ·	10. Name and Address of New Reg	pistered Agent
	PSON, MICHAEL E.		8	1 Name		
	52ND LANE N.		Ē	2 Street Add	dress (P.O. Box Number is Not Acceptab	le)
PINE	ELLAS PARK FL 34665	1	Ĺ			
			Į.	3		
			Ē	4 City		85 Zip Code
						- FL ス スツ <i>XI</i>
11. Pursuant office or agent La	to the provisions of Sections 607.06 registered agent, or both, in the Sta am familiar with, and accept the obt	502 and 607.1508, Florida Stat le of Florida. Such change wa: Igations of, Section 607.0505,	tutes, the abo s authorized Florida Statu	ove-named cor by the corpora es.	rporation submits this statement for the pation's board of directors. I hereby accep	urpose of changing its registered the appointment as registered
SIGNATURE						
	Signature, typical or printed name of registered a			gent signature requ	uired when reinstating)	DATE
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	· · · · · · · · · · · · · · · · · · ·
TPLE	l -	☐ DELETE	1.1 TITL			Change Addition
NAME	SIMNPSON, MICHAEL E. 8430 52ND LANE N.		1,2 NAM			
STREET ADDRESS	PINELLAS PARK FL		- 4	ET ADDRESS		
C-TY - S1 - ZIP	VS			-ST-ZIP		
THRE	SIMPSON DELORES	DELETE	2.1 TITU			Change Addition
NAME	8430 52ND LANE NORTH		2.2 NAM		•	
STREET ADDRESS	PINELLAS PARK FL			ET ADDRESS		
CHY-ST-ZIP TITLE	FINELLAG FANK FL	DELETE		-ST-ZIP		
			3.1 TITLI	1		Change Addition
NAM:			3.2 NAM			
STREET ADDRESS				EY ADDRESS		
C(fy+S1+Z)P TillE		DELETE	3.4. CITY 4.1 TITL	- ST - ZIP		
NAM!				l	•	Change Addition
STREEL ADDRESS			4. 2 NAN			
		•		ET ADDRESS		
CHY+S1-74P THLE		DELETE	4.4 CITY 5.1 TITLE			☐ Change ☐ Addition
NAME		La Decelle	5.1 HILL 5.2 NAM			ш олинде шлинийн
STREET ADDRESS				ET ADDRESS		
CHY-S1-ZIP			5.3 SIME			
THE		DELETE	61 TITLE			Change Addition
NAME		hand Daniel	62 NAM	-		C Outside C Vandinis
STREET ADDRESS				ET ADDRESS		
CHY-ST ZIF		,	6.4 CHTY			

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 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 used in amount of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my appears in Block 12 or Block 13 if changed, or on an attachment with an address. oath; that