## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 

(8)

HOLMES & NARVER, INC.

Principal Place of Business	
999 TOWN & COUNTRY	ROAD

Mailing Address

999 TOWN & COUNTRY ROAD



Suite, Apt. #, etc.  27  Suite, Apt. #, etc.  27  City & State  City & S	ORANGE CA	92668	ORANGE CA 92668						
Sulle, Apt. v. etc.  Sulle, Addition to the provisions of Sections 607-5060 and 607-1508 and 100-1508 and									
Suite Apt II, etc.    Suite Apt II, etc.   Suite Apt II, etc.	2. Principal Pla	ice of Business	2a. Mailing Address						Applied For
COLY & State   Coly &	21		26				95-1599514		L
20	Suite, Apt. #	ł, etc.	<b></b>				5. Certificate of Status Desired	1 1 +	
Zp	City & State		City & State					\$5.0	OO May Be
2    2    3    3    3    3    5    5	23		28				Trust Fund Contribution	LJ Add	ed to Fees
9. Name and Address of Current Registered Agent  CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324  82 Street Address &P.O. Box Number is Not Acceptable)  83 Street Address &P.O. Box Number is Not Acceptable)  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 agent. I be for a discretifie which is discretified by the corporation's board of directors. I hereby accept the appointment as registered agent. I lem familier with, and a discretified by the Corporation's board of directors. I hereby accept the appointment as registered agent. I lem familier with, and a discretified by the Corporation's board of directors. I hereby accept the appointment as registered agent. I lem familier with, and a discretified by the Corporation's board of directors. I hereby accept the appointment as registered agent. I lem familier with a discretified by the corporation's board of directors. I hereby accept the appointment as registered agent. I lem familier with a discretified by the corporation's board of directors. I hereby accept the appointment as registered agent. I lem familier with a discretified by the corporation's board of directors. I hereby accept the appointment as registered agent. I lem familier with a discretified by the corporation's board of directors. I hereby accept the appointment as registered agent. I lem familier. I hereby accept the appointment as registered agent. I lem familier. I hereby accept the appointment as registered agent. I lem familier. I hereby accept the appointment as registered agent. I lem familier. I hereby accept the appointment as registered agent. I lem familier. I hereby accept the appointment as registered agent. I lem familier. I hereby accept the appointment as registered agent. I lem familier. I hereby accept the appointment as registered agent. I lem familier. I hereby accept the appointment as registered agent. I lem familier. I hereby		<b>⊢</b> '			ountry		1		s 199.032,
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CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324  88  80  80  80  80  80  80  80  80  8		9. Name and Address of Current	negisiered Ageni		81 N	ame	TO. Name and Address of New No	agistered Agent	
12. Presuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation authorist this statement for the purpose of changing its registered office or registered agent, or both, in the Strite of Florida. Such change was authorised by the corporation's board of directors. I hereby accept the appointment as registered agent, I am registered agent, I am registered agent, I am the Strite of Florida. Such change was authorised by the corporation's board of directors. I hereby accept the appointment as registered agent, I am registered agent. I am registered	OT 000	DODATION OVETER							
PLANTATION FL 33324					82 S	treet Addr	ess (P.O. Box Number is Not Acceptable	e)	
### City ###					83				
The Pressant to the provisions of Sections 607,1508, Florida Statutes, the above named corporation's board of 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 registered agent to registered agent to record agent to the purpose of changing its registered office agent	PLANIA	111UN FL 33324							
11. Propert to the provisions of Sections 697 (500 and 607;1508, Florida Statutes, the above-harmed corporation submits this statement for the purpose of changing its registered office for registered applict, or both, in the State of Provisions A transportation and the corporation's board of directors. I hereby accept the appointment as registered eigent. I am and accept the obligations of, Section 607,0505, Florida Statutes    SKGNATURE					<b>84</b> C	ity		85 2	Zip Code
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 within and accept the obligations of Section 6C7.0505. Florida Stalutes    12	11 Purcuant to	o the provisions of Sections 607 0502	and 607 1508. Florida Statutes	the et	Y)/(P-D2M)	ed corno	ration submits this statement for the num		registered office
Signal no. paper or interfed annex of tree played days not not the played and not not the played days not not not played days not not not not played days not not not played days not not not not played days not not not played days not not not not played days not not not played days not not not not played days not	or registere	ed agent, or both, in the State of Florida	<ul> <li>a. Such change was authorize</li> </ul>	d by the	corporal	ion's boa	rd of directors. I hereby accept the appo	intment as registere	id agent. I am
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NAME   STACHO, ZOLTAN A.   22 NAME   399 TOWN & COUNTRY RD.   23 STREET ADDRESS   24 CITY-ST-ZIP			F3.051.575			P	·		F7 4322
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and the state of a sta	14. I do hereb		ith this filing is voluntarily furnis				for the exemption stated in Section 119.	07(3)(k), Florida Stat	utes. I further

cently that the information indicates on this armula report or supplemental armular report is true and accurate and that my signature shall have the same legal effect as it 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.

Ut Dennis A. Deslatte

04/18/96

714-567-2400

Daytime Phone #