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May 08 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P92000005260 (4)**

1. Corporation Name
EVERY BUSINESS SERVICE, INC.

Principal Place of Business	Mailing Address
~~1 FLORIDA PARK DR~~ ~~STE 110~~ ~~PALM COAST FL 32137~~ ~~US~~	~~P.O. BOX 730035~~ ~~ORMOND BEACH FL 32173-0035~~ ~~US~~

3. Date Incorporated or Qualified: 11/17/1992
3a. Date of Last Report: 05/01/1996

2. Principal Place of Business
21 315 S. PALMETTO AVE.
Suite, Apt. #, etc.
22 C/O HERMAN
City & State
23 DAYTONA BEACH, FL
Zip 24: 32114 Country 25: VOLUSIA

2a. Mailing Address
26 P. O. BOX 2354
Suite, Apt. #, etc.
27 C/O HERMAN
City & State
28 DAYTONA BEACH, FL
Zip 29: 32115-2354 Country 30: VOLUSIA

4. FEI Number: 59-3153348 ☐ Applied For ☐ Not Applicable

6. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

~~BERNS, MURRAY~~
~~52 WINDING CREEK WAY~~
~~ORMOND BEACH FL 32174~~

10. Name and Address of New Registered Agent

81 Name: N. J. HERMAN, SR.
82 Street Address (P.O. Box Number is Not Acceptable): 315 S. PALMETTO AVE.
83
84 City: DAYTONA BEACH, FL 85 Zip Code: 32114

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] 5/1/97
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	~~D~~	☒ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	~~BERNS, MURRAY~~		1.2 NAME	
STREET ADDRESS	~~52 WINDING CREEK WAY~~		1.3 STREET ADDRESS	
CITY-ST-ZIP	~~ORMOND BEACH FL 32174~~		1.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	HERMAN, JAMES N SR		2.2 NAME	
STREET ADDRESS	128 W GRANADA BLVD		2.3 STREET ADDRESS	
CITY-ST-ZIP	ORMOND BEACH FL		2.4 CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

CR2E034 (9/96)

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: [signature] N. J. Herman, Sr. 5/1/97 (904) 257-3344