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

CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # P93000019833 (1)

SOUTHERN EXPOSURE MAINTENANCE CO. INC.

· · · · · · · · · · · · · · · · · · ·	of Business					
Principal Place of Business			Mailing Address			
9903 MAJESTIC WAY BOYNTON BEACH FL 33437			9903 MAJESTIC WAY BOYNTON BEACH FL 33437			
					3. Date Incorporated or Qualified 04/01/1993	3a. Date of Last Report 03/20/1995
2. Principal Pla	nce of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number	Applied For
21		26			65-0398378	Not Applicable
Suite, Apt #	F, 81C.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Orty & State	· · · · · · · · · · · · · · · · · · ·	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
- Ζφ 5.1	Country	₁ Ζιρ	Cour	ntry	8. This corporation has liability for in	
!4 ∤	25 9. Name and Address of Cur	rent Registered Agent	30		Florida Statutes Yes 10. Name and Address of New Re	
	3, 110, 100, 100, 100, 100, 100, 100, 10	registered Agent		81 Name	10, Name and Address of New Re	gistered Agent
HANNA.	GRETA S		1	20 0	(D.O. D N	
9903 MAJESTIC WAY				82 Street Addi	Address (P.O. Box Number is Not Acceptable)	
BOYNTO	N BEACH FL 33437			83		
			}	84 City		85 Zip Code
-,-,-				,	ration submits this statement for the purp	FL ' '
SIGNATURE 12. THE	Superior special or an earlie of registered at OFFICERS A	used and trie if applicable AND DIRECTORS DELETE	(NO ⁷ € Registered / 13. 1 1 H	agent signature require	d when reinstating: ADDITIONS/CHANGES TO OFFICE	DATE DERS AND DIRECTORS IN 12 Change
NAME	HANNA, JOSEPH H	[] been	1 2 NA			Change Addition
STREET ADDRESS	9903 MAJESTIC WAY			LEET ADDRESS		
C(TY-S1-7)P	BOYNTON BEACH FL 3343	37		Y - \$1 - 7iP		
T-T11	D	☐ DELETE	2 1 TIT	LE		Change Addition
NAME	HANNA, GRETA S		2.2 NAI	stE .		
STREET ADORESS	9903 MAJESTIC WAY	19		EEF ADDRESS		
CHY ST ZIE TITLE	BOYNTON BEACH FL 3343	S7 □ DELETE	2 4 CHT 3 1 HT	Y-ST-ZIP		
NAMr .			3.2 NA	}		Change Addition
STREET ADDRESS				EET ADDRESS		
CiT×+S1-7iP				ST-ZIP		
TITLE		☐ DELETE	4. 1 111	t E		Change Addition
NAMi			4 2 NAI	AE		
STRLET ADORESS			4.3 STR	EET ADDRESS		
CITY-ST-7IP T.ILF		□ btitit		r · ST - ZIP		
SAM:		☐ DECETE	5 1 TIT			Change Addition
STREET ADDRESS				FET ADDRESS		
CTY-ST-ZP			I	r-ST-ZIP		
TILF	DELETE					Change Addition
MM:			6.2 NA	/E		—
STREET ADDRESS			6 3 STA	LET ADDRESS		
City St. Zili	postific that the information	al . Sur alex are a factorist and a factorist	6 4 CIT	r-ST-ZIP		
certify that I oath, that I	tue intermation indicated on this ar	Anual report or supplemental ar poration or the receiver or trus	nnual report is tee empowere	true and accura	or the exemption stated in Section 119.0 te and that my signature shall have the si s report as required by Chapter 607, Flor	amp local offect on it made under

SIGNATURE:

Joseph H. Hanna Joseph H. Hanna, President 3/6/96