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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000021895 (6)

DETAIL SPECIALIST, INC.

FILED Mar 26 1998 8:00am Secretary of State

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Principal Place of Business Mailing Address				{		
		Mailing Address	·			
104 VIA DE CASAS NORTE 104 VIA DE CASA			ORTE			
BOCA TEECA	4011 Ft 93490	BOCA TEECA		DO NOT WRITE IN THE CRACE		
US	ACH FL 33426	BOYNTON BEACH FL 33426 US		DO NOT WRITE IN THIS SPACE		
03				3. Date Incorporated or Qualified 03/19/1993		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26 104 VIR DE CASAS NORTE			65-0399836	Not Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.				\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23	28 BOYATON BCH		CH r	4	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Cour	try	8. This corporation owes or has paid the curr	rent vear Intangible
24	25	29 33426	30		· · · · · · · · · · · · · · · · · · ·	] Yes □ No
	g, Name and Address of Curren	t Registered Agent	T		10. Name and Address of New Registered	Agent
SOOMAI, HARRILAL B1				Name		
104 VIA DE CASAS NOTRE						
			82 Street Addre		ess (P.O. Box Number is Not Acceptable)	
BOCA TEECA ROYNTON REACH EL 33426				12		
BO.	YNTON BEACH FL 33426		['	~		
			l t	34 City		85 Zip Code
				'	FL	11.
11. Pursuant t	o the provisions of Sections 607 0502	2 and 607.1508, Florida Statut	es, the ab	ove-named corpo	oration submits this statement for the purpose of	changing its registered
agent. I ar	n familiar with, and accept the obliga	of Florida: Such Change was a Itions of, Section 607.0505, Fic	aumorized orida Statu	by the corporation tes.	on's board of directors. I hereby accept the appoint	ointment as registered
SIGNATURE						
	Signature, typed or ponted name of registered ager	it and title if applicable (NOT	E: Registered	Agent signature require	d when reinstaling) DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 1171	E		Change Addition
NAME	SOOMAI, HARRILAL		1.2 NAN	ıF		
STREET ADDRESS	104 VIA DE CASAS NORTE			EET ADDRESS		
	BOYNTON BEACH FL					
CITY - ST - ZIP	T DOTATION DEACTIVE	☐ DELETE		'-ST-ZIP		
TITLE	000141 (/40/844755.0	U OFLETE	2.1 TITL	i		☐ Change ☐ Addition
NAME	SOOMAI, KASHMATEE S		2.2 NAME			
STREET ADDRESS	104 VIA DE CASAS NORTE		2.3 STR	EET ADDRESS		
CITY-ST-ZIP	BOYNTON BEACH FL	_	2.4 CIT	Y-ST-ZIP		
TITLE			3.1 TITL	Ε Τ		Change Addition
NAME			3.2 NAA	ie		
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP				r-ST-ZIP		
TITLE		DELETE	4.1 TITL			Change Addition
1				1		C custific C vanitott
NAME			4. 2 NAJ			
STREET ADDRESS			4.3 STR	ET ADORESS		
CITY+ST-ZIP			4.4 CITY	-ST-ZIP		
TITLE		☐ DELETE	5.1 TITL	E	İ	Change Addition
NAME			52 NAM	E [		
STREET ADDRESS			5.3 STR	ET ADDRESS		
CITY-ST-ZIP				-ST-ZIP		
TITLE		DELETE	6.1 TITL			☐ Change ☐ Addition
		- Victic				
NAME			6.2 NAM			
STREET ADDRESS			6.3 STR	ET ADDRESS		
CITY-ST-ZIP				-ST-ZIP		
14. I hereby co	ertify that the information supplied wit	h this filing does not qualify fo	or the exen	ption stated in S	Section 119.07(3)(i), Florida Statutes. I further cer	tify that the information

Interest year that the information supplied with this filling does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental 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 frustee 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:

Handay

dooma

3/20/91

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