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PROFIT CORPORATION ANNUAL REPORT

1996



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

DOCUMENT #	P93000066135	(3)
1 Cornoration Name		\ _/

Principal Place of Business Mailing Address SubMissE FL 33322 3. Date introoperated or Clustered SubMissE FL 33322 3	1. Corporation	Name	000066135 (3)				
Maining Address Maining Address SUMRISE FL 33322 SUMRISE FL 33	JRS BOBCAT SERVICE, INC.							
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Principal Place of Business 2a. Mailing Address 4. FET Number Applied For Ap								
Suite, Apt. 6, etc. 20						09/17/1993 10/30/1995		
Salte, Apt. #. etc. Surfe, Apt. #. etc.		ce of Business	— ĭ			OP 044070F		
City's State City's State City's State City's State State City's State Country State Sta	Suite, Apt. #	, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional		
Zop			City & State			6. Election Campaign Financing \$5.00 May Be		
Superior	Zıp	 	Zip		try	8. This corporation has liability for intangible tax under s 199.032,		
KLISTON, TODD W 8211 W BROWARD BLVD STE 200 PLANTATION FL 33324 84 Cay FL Bs Zo Code 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 Subtraction by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Florida Subtraction by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Florida Statutes, the above named corporation submits this statement for the purpose of clinaring its registered office or registered agent, or both, in the State of Florida Statutes, the above named corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both or restriction of registered agent, in amount of the purpose of clinaring its registered office or registered agent, in amount of the purpose of clinaring its registered office or registered agent, in amount of the purpose of clinaring its registered office or registered agent, in amount of the purpose of clinaring its registered office or registered agent, in amount of the purpose of clinaring its registered office or registered agent, in amount of the purpose of clinaring its registered office or registered agent, in amount of the purpose of clinaring its registered office or registered agent, in amount of the purpose of clinaring its registered office or registered agent, in amount of the purpose of clinaring its registered office or registered agent, in amount of the purpose of clinaring its registered office or registered agent, in amount of the purpose of clinaring its registered office or registered agent, in amount of the purpose of clinaring its registered office or registered office or registered office or registered office or registered agent, in amount of the purp		9. Name and Address of Cu	rrent Registered Agent			10. Name and Address of New Registered Agent		
STE 200 PLANTATION FL 33324 11. Present to the provisions of Sections 607 0502 and 507 1508. For its Statutes, the above named corporation submits this statument for the purpose of changing its registered office familiar with and accept the obligations of, 50502 and 507 0505, For ids Statutes, the above named corporation submits this statument for the purpose of changing its registered office familiar with and accept the obligations of, 50502 and 507 0505, For ids Statutes, the above named corporation submits this statument for the purpose of changing its registered office familiar with and accept the obligations of, 5050, For ids Statutes by the corporation's board of directors. Thereby accept the depointment of strength again. I am statute again. I am s				[+	Name			
STE 200 PLANTATION FL 33324 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Pointide 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 experimental as registered agent. I am state of Florida Such change was authorized by the corporation's board of directors. I hereby accept the experimental as registered agent. I am state of registered agent. I am s				ī	32 Street A	Address (P.O. Box Number is Not Acceptable)		
The Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of purpose of office of Nicco 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 serving the observations of, Section 607.0505, Florida Statutes. SIGNATURE 12.					33			
11. Presignate to the provisions of Sections 607.0502 and 607.1508. Florids Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, in this State of Produce Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0508, Florida Statutes. SIGNATURE	PLANTA	TION FL 33324		1	B4 City	85 Zip Code		
12.	or registere	ed agent, or both, in the State of F	Florida. Such change was authorize	ed by the co	e-named co prporation's t	rporation submits this statement for the purpose of changing its registered office		
12.		Starature, based or protect name of registered	anent and title if available BIO	TE Parietarari	ngot signaturu ra	DATE.		
SHORT, JAMES R 8441 NW 26 ST SUNRISE FL 33322 12 NAME 12 NAME 12 NAME 13 STREET ADDRESS CITY-ST-2P SUNRISE FL 33322 14 CITY-ST-2P 17 ITLE					gon syru.ore re	<u> </u>		
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)[k), Florida Statutes. I further	ì							
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				shed and d	oes not qual			

appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Pacsident