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

1. Corporation	MENT # P9300 OOR SERVICES, INC.	00071383 (2)		
Principal Place	of Business	Mailing Address			Otto Boill Distr 10001 tings linkt 18101 told 1901
2788 SW 45TH COURT FT. LAUDERDALE FL 3312 US		2788 SW 46 COURT FT. LAUDERDALE FL			
		US		 Date Incorporated or Qualified 10/14/1993 	3a. Date of Last Report 05/01/1995
2. Principal Place of Business		2a. Mailing Address		4. FEI Number 65-0445332	Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certif-cate of Status Desired	Not Applicable \$8.75 Additional
22		27			Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees
Ζφ	Country	Zip	Countr:	······································	or intangible tax under s. 199.032,
24	25 9. Name and Address of Curre	nt Bogistared Agent	30	Florida Statutes Ye 10. Name and Address of New	— ~
	y, Name and Address of Curre	iii negisterea Agent	81 Na		Hegistered Agent
WILLIAM	IS. DON		82 Str	eet Address (P.O. Box Number is Not Accept	able)
2788 SW 46TH COURT				eet Address (F.O. Box Normber is Not Seepte	
FT. LAU	DERDALE FL 33312		83		
			84 City	•	85 Zip Code
11. Pursuant to	the provisions of Sections 607.050	2 and 607.1508. Florida State	ites, the above game	d comporation submits this statement for the n	FL 65 2.0 0000
or registere familiar with	ed agent, or both, in the State of Flor h, and accept the obligations of, Sec	ida. Such change was author tion 607,0505. Florida Statute	ized by the corporations	d corporation submits this statement for the p in's board of directors. Thereby accept the ap	ppointment as registered agent. I am
SIGNATURE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	Signature, typind or printed harrie of registers Lager			tire, required when reinstaling	DATE
12.	D OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OF	FFICERS AND DIRECTORS IN 12 Change Addition
NAME	WILLIAMS, DON		1.2 NAME		
STREET ADDRESS	2788 SW 46TH COURT		1.3 STREE " ADDRE	rss	
CITY-ST-ZIP	FT LAUDERDALE FL		1.4 CHY+ ST-ZIP		
TITLE		☐ DELETE	2 1 TITLE		Change Addition
NAME STREET ADDRESS			2.2 NAME 2.3 STREE LADDRE	zee	
CITY-ST-ZIP			2.4 CITY - ST - ZIP	/	
TITLE		DELETE	3 1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDR	ESS	
CITY-ST-ZIP TITLE		☐ DELETE	3.4 CHY+ST+ZIP 4.1 DILE		☐ Change ☐ Addition
NAME			4.2 NAME		_ charge _ hashes
STREET ADDRESS			4 3 STREE " ADDRE	ess	
CITY-ST-ZIP			4.4 CITY - ST - ZIP		<u></u>
TITLE		☐ DELETE	5 1 TITLE		Change Addition
NAME STREET ADDRESS			5.2 NAME 5.3 STREE ADDRI		
CITY - ST - ZIP			53 STREE ADDR	.33	
TITLE	<u> </u>	DELETE	6 1 TITLE		☐ Change ☐ Addition
NAME			62 NAME		
STREET ADDRESS			6.3 TREE " ADDRE	ess	
14. I do hereby	certify that the information supplied	with this filmo is voluntarily for	(4 City - St - ZIP	qualify for the exemption stated in Section 11	9.07(3)(k), Florida Statutes, Uturther
certify that	the information indicated on this ann	iua' r ko g it or supplemental an	nual report is true and	d accurate and that my signature shall have the cute this proof as required by Chapter 607.	ne same legal effect as if made under
appears in	Block 12 or Block 13 I changer, or	on all attachment with an ad-	dress . A	1 /1	
SIGNAT	URE: \ \ \alpha \ \ \		Dull	LIMANS 41	3-96 954-
	SIGNATURE AND THE PO	PANTED NAME OFFI	CER OR PRECTOR	JIMAMAS 4-1	Daytinje Phone