SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # P9400008460 (5)

CIVIL SI	ervice training cen	11000000 110 1100 8400 8400 1100 8					
Principal Place	of Business	Mailing Addre	ss				
4000 NORTH S SUITE 304		SUITE 304	STATE RD. 7				
LAUDEHDALE	LAKES FL 33319	LAUDERDALE	LAKES FL 33319	3. Date Incorporated or Qualified 02/02/1994			
2. Principal Pla	ce of Business	2a. Mailing Ad	dress	4. FEI Number 65-0487377			
Suite, Apt #	, etc	Suite, Apt	#, etc	5. Certificate of Status Desired			
22		27		G. Commented of clotes a pesition			
City & State		City & Stat	e	6. Election Campaign Financing			
23		28		Trust Fund Contribution			
Zip 24	Country 25	7ip	Country 30	8. This corporation has liability for Florida Statutes			
	9 Name and Address of C	urrent Benistered Anen	, <u>, , , , , , , , , , , , , , , , , , </u>	10 Name and Address of New Ro			

|--|

3a. Date of Last Report 06/05/1995

Applied For Not Applicable \$8.75 Additional

22		27							1 00 110			
City & State	;	City & State	F-1 ·				ampaign Financing Contribution		\$5.00 Added 1			
Zip	Country	7 ₁ p		str								
	··· · · · · · · · · · · · · · · · · ·	<u>├</u> 1	Cour				oration has liability fo	r intangible : X Yes	tax unders I No	199 032,		
24	25	29	30	_		Florida Sta	d Address of New R					
9. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYO ST. TALLAHASSEE FL 32301					Name /	TO. Name and	Address of New H	egistered A	yen.			
					HK	THUR	DIENBER	KG)		}		
					Street Addres	s (P.O. Box Nu	mber is Not Accept	Die Porn	· 7			
					40			INITAL)			
					.\$//	ITE 30	4					
				84	City		1446		85 ZIP	Sode		
				11	L HIADI	ROBLE	LAKES	<u> </u>] 33.	319		
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 affice or registered again, or text, in the State of Florida, Such change was sufficiently be corporation's board of directors. Therefore again, or text, in the State of Florida, Such change was sufficiently be corporation's board of directors. Therefore again, or text to appear the above that the suppose of the purpose of changing its registered												
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 josh, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of Section 607,0505, Florida Statutes.												
SIGNATURE	V Sticker (1							7/0	1/96		
	algreature, typed or purifica name of registered a	igent I dibbor applicable	NOTE Reguler	st Age	r, sidiratine tedented	when reinstating)		CALE				
12.	OFFICERS A	NO DIRECTORS	/ 13.				CHANGES TO OFF					
TITLE	P		ELETE 111	1-TLF	$ \mathcal{P}/t $	9		t	Y Change	Addition		
NAME	OXENBERG, ARTHUR		121	MAME	"							
STREET ADDRESS	6940 NW 5TH ST		13	STREET	ADDRESS							
CITY-ST-ZIP	PLANTATION FL			CITY - S	T - ŽIP			-		<u></u>		
TITLE			ELETE 211	TITLE				L	Change	Addit-on		
NAME			221	MAME								
STREET ADDRESS			23	STREET	ADDRESS							
CITY-ST-ZIP				CITY - S	ST-ZIP							
TITLE			ELETE 311	TITLE					Change	Addition		
NAME			321	NAME								
STREET ADDRESS			333	STREET	ADDRESS					į		
CITY-ST-ZIP				CITY - 9	51 - ZIP							
TITLE			ELETÉ 41	HILE				Ţ	Change	Add tion		
NAME			4 2	NAME								
STREET ADDRESS			43	STREET	ADDRESS							
CITY-ST-ZIP				CITY-S	T - ZiP							
TITLE			ELETE 51	TILLE				T	Change	Addition		
NAME			52	NAME								
STREET ADDRESS			53	STHEET	address							
CITY-ST-ZiP			54	CITY - S	T-ZIP							
THLE			ELETE 61	TITLE					Change	Addition :		
NAME			6.2	NAME								
STREET ADDRESS			63	STREET	ADDRESS							
CITY-ST-ZIP			6.4	CITY - S	T - 21P							
	by certify that the information supportify that the information indicated											

4. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 1.19 07(3)(k). Florida Statutes 1 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 obtained in direction of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if charged, or an attachment with an address.

SIGNATURE: SIGNATURE AND TYPED OF PRINTED NAME OF SIGN

7/01/96 (954) 484-4842)

CR2E034 (3/96)