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

**PROFIT** CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

**FILED** May 01 1996 8:00 am Secretary of State

DOCUMENT # HARCOURT SERVICES INC 7400 NW 68TH AVENUE Suize23 MIAMI LAKTS, FL 33015 3. Date Incorporated or Qualified 3a. Date of Last Report 2. Principal Place of Business 2a. Mailing Address Applied For 21 17400 NW GSTHAUE 26 17400 NW GSTHAUF 650488750 Not Applicable \$8.75 Additional SU178 202 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be MIAMI 28 WIAMI Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199.032, 9. Name and Address of Current Registered Agent Florida Statutes ☐ Yes 🙀 No 10. Name and Address of New Registered Agent DYEBODE DYE TUNJI 82 Street Address (P.O. Box Number is Not Acceptable) 17400 NA 687H AVENUE SUNEADS 83 419M1 LAKE, AL 33015 Zip 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, 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 0505, Florida Statutes. OFFICERS AND DIRECTORS SIGNATURE IN THE Registered Agent's pratice required when remaining 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PRESIDER.

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NA CO NIN GENT EVENUE JUNE 2330/5 1.13(1) 5 ☐ Change ☐ Addition NAME 1.2 NAME STREET ADDRESS 1.3 STREET ACCRESS CITY-ST-ZIP 1400Y-S" ZIP THILE 2.1 DOLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 24 CHY - ST - ZIP THLE DELETE 3 1 TIFLE Change ☐ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4 CITY - S1 - ZIP TITLE DELETE 4 1 TITLE ■ Addition Change NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 300001207 -05/06/36--01003 CITY - ST - ZIP 4.4 CITY - ST - ZIP TITLE DELETE 5 1 Tille \*\*\*200.00 ☐ Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5 4 CITY - ST - 7IF TITLE [] DELETE 6 1 TITLE Change NAME 6.2 NAME

64 CITY - \$1 - 7-P 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 Statute of 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 officer or director of the corporation or the receiver or trustee 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 attainment t with an address

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(12/95)

CR2E034