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

P94000028152 (4) DOCUMENT

HARCOURT SERVICES, INC.

FILED Apr 23 1998 8:00am Secretary of State

Principal Place of Business Mailing Address						\$ 4001100 140 10214 01013 0016) 00114 00111 00	18 11001 IOIO1 IIO 01 I	JO 1101 1201
18068 S.W. 30 SILVERLAKES PEMBROKES US		18068 S.W. 30TH CT SILVERLAKES PEMBROKE PINES FL US	18068 S.W. 30TH CT SILVERLAKES PEMBROKE PINES FL 33028			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/11/1994		
2. Principal Pa	ace of Business	2a. Mailing Address	Mailino Address			4. FEI Number	IAn	plied For
21		26	 			65-0488750		t Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 🗚	
22		27				C. Commence of States Besides	Fee Re	
City & State	9	City & State	 			6. Election Campaign Financing	\$5.00	
Zip	Country Zip			ntry		Trust Fund Contribution 8. This corporation owes or has paid th	Added to	
24	25	29	30	,		Personal Property Tax due June 30.		No
9. Name and Address of Current Registered Agent						10. Name and Address of New Registe	red Agent	
DUETUNJI, OUEBODE					Name			
18068 S.W. 30TH CT.				82	Street Addres	Address (P.O. Box Number is Not Acceptable)		
SILVERLAKES				_				
PEI	MBROKE PINES FL 33029			83]
				84	City		FL 85 Zip C	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the					named corpor	ration submits this statement for the purpo	se of changing its	s registered
office or re agent. I ar	egistered agent, or both, in the Sta m familiar with, and accept the obl	te of Florida. Such change was igations of, Section 607,0505, F	authorized Iorida Stat	d by utes.	the corporation	n's board of directors. I hereby accept the	appointment as i	registered
SIGNATURE Signature, typed or printed name of registered agent and title if approable. (NOTE: Registered Agent signature required when reinstating) DATE								
12. OFFICERS AND DIRECTORS 13				Apon	r signature reduceo	ADDITIONS/CHANGES TO OFFICERS		S IN 12
TITLE				1.1 TITLE			Change	Addition
NAME				1.2 NAME				
			1.3 ST	1.3 STREET ADDRESS				ļ
CITY-ST-ZIP				1.4 CITY - ST - ZIP				
TITLE	C	☐ DELETE	2.1 1(1	2.1 TITLE			☐ Change	☐ Addition
NAME	THOMAS, LOLA	OD VEDLAVEC		2.2 NAME 2.3 STREET ADDRESS				
STREET ADDRESS	18068 S.W. 30TH COURT, PEMBROKE PINES FL	OILVERLANEO	. I					
CITY-ST-ZIP	FEMDRUNG FINES FL	T DELETE	2. 4 CII DELETE 3.1 TIT		- ZIP		Change	Addition
TITLE NAME		□ pricit		3.1 TITLE 3.2 NAME			change	L. Auguri
STREET ADDRESS			3.3 STREET ADDRESS		UNDBEEC			
CITY-ST-ZIP	'			3.4. CITY-ST-ZIP				
TITLE			4.1 10				Change	Addition
NAME		4.		4. 2 NAME				
STREET ADDRESS	: 4.3		4.3 ST	4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CI	TY-ST	- ZIP			
TITLE		DELETE	5.1 111	LE			Change	Addition
NAME			5.2 NAME			'¥ 		
STREET ADDRESS	5.3		5.3 ST	5.3 STREET ADDRESS				
CITY+ST-ZIP			_	5.4 CITY-ST-ZIP				
TITLE	DE			6.1 TITLE			Change	Addition
NAME				6.2 NAME				
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP	adily that the information according	Other this follow standard and a 1206.		Y-SI		action 110 07/3Vi) Florida Statutes furth	or cortify that the	information

Indicated on this annual report or supplied with this ming does not quality for the exemption stated in Section 1.19.07(3)(). Florida Statutes, I further certify that the information in this annual report is 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 of 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 attachment with an address.