

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.)

APPROVED
AND
FILED

1996 SEP -6 PM 1:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000031752 (6)

1. Corporation Name

COMPLETE SERVICES OF THE PALM BEACHES, INC.



000001952320
-09/20/96--01014--013
****225.00 ****225.00

Principal Place of Business Mailing Address
18331 LAKE BEND DRIVE P.O. BOX 30803
JUPITER FL 33458 PALM BEACH GARDENS FL 33420

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt #, etc 26 Suite, Apt #, etc
22 City & State 27 City & State
23 Zip 24 Country 29 Zip 30 Country

3. Date Incorporated or Qualified 3a. Date of Last Report
04/22/1994 11/21/1995
4. FEI Number 65-0479288 Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent
HOLLAND, JANICE 81 Name
18331 LAKE BEND DRIVE 82 Street Address (P.O. Box Number is Not Acceptable)
JUPITER FL 33458 83
84 City 85 Zip Code FL

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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Signature (Typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent's signature required when resigning) DATE

12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE PS 11 TITLE
NAME HOLLAND, JANICE 12 NAME
STREET ADDRESS 18331 LAKE BEND DR. 13 STREET ADDRESS
CITY - ST - ZIP JUPITER FL 33458 14 CITY - ST - ZIP
TITLE 21 TITLE
NAME 22 NAME
STREET ADDRESS 23 STREET ADDRESS
CITY - ST - ZIP 24 CITY - ST - ZIP
TITLE 31 TITLE
NAME 32 NAME
STREET ADDRESS 33 STREET ADDRESS
CITY - ST - ZIP 34 CITY - ST - ZIP
TITLE 41 TITLE
NAME 42 NAME
STREET ADDRESS 43 STREET ADDRESS
CITY - ST - ZIP 44 CITY - ST - ZIP
TITLE 51 TITLE
NAME 52 NAME
STREET ADDRESS 53 STREET ADDRESS
CITY - ST - ZIP 54 CITY - ST - ZIP
TITLE 61 TITLE
NAME 62 NAME
STREET ADDRESS 63 STREET ADDRESS
CITY - ST - ZIP 64 CITY - ST - ZIP

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 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Janice Holland / JANICE HOLLAND 8/2/96 (561) 747-3689
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (3/96)