## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

ANNU	JAL REPORT 1997	Sandra B. M Secretary of DIVISION OF COR	State	Secretary	of State
	MENT # <b>P94000</b> REE SERVICE, INC.	041112 (1)		T RECEIPEL HAR LEIGH BOOM BOWN BRINN BANN BOWN BOWN	KIROR KARON KARON KARON BIROK BIROK
Principal Diag	o of Business	Mailing Address			.j661  / <b>18</b> 4   1481   1461   1361   1381
Principal Place of Business 11541 SW 12TH CT FT. LAUDERDALE FL 33325		11541 SW 12TH CT FT. LAUDERDALE FL 33325-4507			
US		US			
9 Principal D	log of Business	2a. Mailing Address			Date of Last Report )4/29/1996
2. Principal Place of Business 21		26 Maning Address		65-0493975	Applied For Not Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27			Fee Required
City & State	0	Cily & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	7(p	Country	8. This corporation has liability for intarts	
24	25	29 30		Florida Statutes Yes	□ No
001	9. Name and Address of Current	Registered Agent	Od Name	10. Name and Address of New Register	ed Agent
CORBEIL, JEAN-LOUIS					
11541 S.W. 12TH CT FT. LAUDERDALE FL 33325			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
83			83		
84			84 City	F	85 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. I hereby accept the appointment as registered agent. I am familia with, and accept the obligations of Section 607.050 Florida Statutes.					
agent, I am lamilia with, and accept the obligations of Section 607.0595. Florida Statutes.					
SIGNATURE	Signature, typed or printed name of registered agent	asked to the second	gistered Agent signature requir	red when reinstalling) DAT	<i>-7 1</i>
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	·
TITLE	P	DELETE	1.1 HILE		Change Addition
NAME	CORBEIL, JEAN-LOUIS 11541 S.W. 12 CT		1.2 NAME		
STREET ADDRESS	FT. LAUDERDALE FL	1	1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	S	DELETE	1.4 C(1Y - S1 - Z(P) 2.1 T(TuE)		Change Addition
NAME	LABONTE, MARCEL	2,5,,,,,,	2.2 NAME		C Change C Production
STREET ADDRESS	11541 S.W. 12 CT		2.3 STREET ADDRESS	· ·	
CITY-ST-ZIP	FT LAUDERDALE FL		2. 4 CITY - \$1 - ZIP		
TITLE		DELETE	3 1 THUE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	3.4. CITY - ST - 7/P 4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		No. 1	4.4 CITY - ST - ZIP		
TIFLE		☐ DELETE	5.1 TALE		Change Addition
NAME STREET ADDRESS			5.2 NAME 5.3 STREET ADDRESS		
CITY-ST-ZIP		4	5.4 CITY - \$1 - ZIP		ļ
TITLE		☐ DELETE	6.1 1/11.6		Change Addition
NAME		ľ	6.2 NAME		
STREET ADDRESS		ì	63 STREET ADDRESS		
CITY-ST-ZIP		<b>.</b>	6.4 CITY-\$1-ZIP		

I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 empoured to excute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 Johangad, or on an attachmost 13 that my name appears in Block 12 or Block 13 Johangad.

**FILED** 

Apr 23 1997 8:00am