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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

DOCUMENT #

P9400041399 (4)

| CUSTOM  | IZED SERVICES OF S                             | STUART, INC.  |   |   |                                      |   |                             |                           |                                 |
|---|--|---|---|---|--------------------------------------|---|-----------------------------|---------------------------|---------------------------------|
| Principal Flace of Business Maining Address  944 N.W. SPRUCE RIDGE DRIVE, B-6  944 N.W. SPRUCE RIDGE DRIVE, B-6   |  |   |   |   |                                      |   |                             | 41 <b>11666</b> (141)     | 1 <u>10110 1011 1001</u>        |
| STUART FL 3499  |  | STUART FL 34994   | KIDGE DKIYE.  | 8-6   |                                      |   |                             |                           |                                 |
|   |  |   |   |   |                                      | 3. Date Incorporated or Qualified 05/27/1994  | 1                           | of Last R                 | •                               |
| Principal Piace   | of Business                                    | 2a. Mailing Address   |   |   |                                      | 4. FEI Number   |                             |                           | Applied For                     |
|   |  | 26  |   |   |                                      | 65-0490754  |                             |                           | Not Applicable                  |
| Suite, Apt. #, etc Suite, Apt. #, etc. 27   |  |   |   |   |                                      | 5. Certificate of Status Desired  |                             |                           | Additional<br>Required          |
| City & State City & State 28  |  |   | THE STREET ST. WHEN THE SECURITION SHEET.                   | **************************************                      |                                      | Election Campaign Financing     Trust Fund Contribution                               | \$5.00 May Be Added to Fees |                           |                                 |
| Zip   | Country  | Zφ  | _   | untry   |                                      | 8. This corporation has liability for   |                             | x under s                 | 199.032,                        |
|   | 25   | 29  | 30  |   |                                      |   | □ No                        |                           |                                 |
|   | ). Name and Address of Cur                     | rrent Registered Agent  |   | 81  | Nama                                 | 10. Name and Address of New F   | legistered .                | Agent                     |                                 |
| FISHER, JO  | Vecon b  |   |   |   | Name                                 |   |                             |                           |                                 |
| 2300 E. OC  |  |   | 82  | Street Addr   | ess (P.O. Box Number is Not Acceptat | ole)  |                             |                           |                                 |
| SUITE E-3   |  |   |   | 83  |                                      |   |                             |                           |                                 |
| STUART FL   | . 34996  |   |   | 84  | City                                 |   | FL                          | 85 Z                      | p Code                          |
| <ul> <li>or registered a</li> </ul>   | agent, or both, in the State of f              | 0502 and 607.1508, Florida Sta<br>Florida, Such change was autho<br>Section 607.0505, Florida Statu | orized by the   | corp<br>corp  | named corpor<br>oration's boar       | ration submits this statement for the pur<br>of of directors. I hereby accept the app | roose of cha                | nging its r<br>registered | registered offic<br>Lagent. Lam |
|   | and accept the obligations of, a               | Section 607.0305, Monda Statu   | nes.  |   |                                      |   |                             |                           |                                 |
| GNATURE. sign   | at ire, typelo or predest name of registered a | agent and tilk if applicable  | (NOTE Registere   | d <b>Ap</b> -n  | it signature require                 | of when reinstahing   | DATE                        |                           |                                 |
| <u>.</u>  |  | AND DIRECTORS   | 13.   |   |                                      | ADDITIONS/CHANGES TO OFF  |                             |                           |                                 |
|   | D  | DELETE.   | 1 1   | MLE   |                                      |   | [                           | ] Change                  | Addition                        |
|   | ,  |   |   | 12 NAME   |                                      |   |                             |                           |                                 |
|   | 944 N.W. SPRUCE RIDGE                          | : UHIVE, B-B  |   |   | ADDRESS                              |   |                             |                           |                                 |
| Y-SE ZP   | STUART FL 34994                                | DELETE  | 140   | TY-S  | T · ZIP                              |   | r                           | Change                    | Addition                        |
| di  |  | BEET IE   | 221   |   |                                      |   | L                           | _ Change                  | ☐ Madillori                     |
| RELEADDRESS   |  |   |   |   | ADDRESS                              |   |                             |                           |                                 |
| Y - S <sup>3</sup> - 71 <sup>2</sup>  |  |   |   | ITY-S   |                                      |   |                             |                           |                                 |
| LF.   |  | DELETE  | 3 1   |   |                                      |   |                             | Change                    | Addition                        |
| <u>#</u> }  |  |   | 321   | IAME  |                                      |   | _                           | _                         | _                               |
| ICET ADORESS  |  |   | 33  | STREET  | r address                            |   |                             |                           |                                 |
|   |  |   |   | DIY-S   | IT - ZIP                             |   |                             |                           |                                 |
|   |  |   | 34(   |   |                                      |   |                             | Change                    | Addition                        |
| Y - S1 - 713  |  | ☐ DELETE  | 4.1   |   | j                                    |   |                             | _1 Onlings                |                                 |
| Y - S <sup>1</sup> - 7 <u>1<sup>5</sup></u>   |  | DELETE  | 4, 1  |   |                                      |   | [                           |                           |                                 |
| Y-S1-71 <del>3</del><br>E<br>ME   |  | ☐ DELETE  | 4. 1<br>4.2 l   | THTLE<br>IAME   | ADDRESS                              |   |                             | Onlings                   |                                 |
| Y-S1-ZIP<br>E<br>ME<br>EE1 ADDRESS  |  |   | 4.1<br>4.21<br>4.35<br>44(                                  | THUE<br>IAME<br>STREET<br>DITY - S                          |                                      |   |                             |                           |                                 |
| 7-51-715<br>E<br>RELADDRESS<br>F ST-715   |  | DELETE  | 4.1<br>4.2<br>4.3<br>4.3<br>4.4<br>5.1                      | TITLE<br>IAME<br>STREET<br>DITY - S<br>TITLE                |                                      |   |                             | Change                    | ☐ Addition                      |
| Y-S1-ZIP<br>E<br>ME<br>EET ACORESS<br>Y-ST-ZIP<br>E   |  |   | 4.1<br>4.21<br>4.35<br>4.4(<br>5.1<br>5.21                  | TITLE<br>IAME<br>STREET<br>CITY - S<br>TITLE<br>IAME        | it - ZIP                             |   |                             |                           | ☐ Addition                      |
| Y ST-712<br>LEFF ADDRESS<br>V ST-712<br>LEFF ADDRESS  |  |   | 4.1<br>4.2<br>4.3<br>4.4<br>5.1<br>5.2<br>5.3               | TITLE IAME STREET CITY-S TITLE IAME STREET                  | ADDRESS                              |   |                             |                           | ☐ Addition                      |
| Y-S'-7P  LE  ME  HEEL ADDRESS  Y-SI-7P  LE  ME  HEL ADDRESS  Y-SI-7P  |  | <u>□</u> 0€1€1€   | 4.1<br>4.21<br>4.33<br>4.40<br>5.1<br>5.21<br>5.33<br>5.40  | TITLE HAME STREET STITLE HAME STREET STREET                 | ADDRESS                              |   | ]                           | Change                    |                                 |
| Y-S'-7P  IF  ME  HEED ADDRESS  Y-SI-7P  LE  ME  HEEL ADDRESS  Y-SI-7P  LE  ACTUAL ADDRESS  ACTUAL ADDRESS  LE  ACTUAL ADDRESS |  |   | 4.1<br>4.3<br>4.4<br>5.1<br>5.2<br>5.3<br>5.4<br>6.1        | TITLE JAME STREET STITLE JAME STREET STREET STITLE          | ADDRESS                              |   | ]                           |                           | ☐ Addition                      |
| Y-S1-7P  TH  ME  HEED ADDRESS  Y-S1-7IP  LE  ME  HLET ADDRESS  LY-ST-ZIP  LE  ML  |  | <u>□</u> 0€1€1€   | 4.1<br>4.3<br>4.4<br>5.1<br>5.2<br>5.3<br>5.4<br>6.1<br>6.2 | TITLE JAME STREET JITLE JAME STREET STREET STITLE JAME JAME | ADDRESS                              |   | ]                           | Change                    | _                               |
| TY-S1-719 TH  MME INEET ADDRESS TY-S1-719 THE TADDRESS MY-S1-719 THE TADDRESS TY-S1-719 THE TADDRESS TH-S1-719 THE TADDRESS TH-S1-719 THE TADDRESS  |  | <u>□</u> 0€1€1€   | 4 1<br>432<br>440<br>5 1<br>5 27<br>5 30<br>6 1<br>6 27     | TITLE JAME STREET JITLE JAME STREET STREET STITLE JAME JAME | ADDRESS ADDRESS ADDRESS              |   | ]                           | Change                    |                                 |

SIGNATURE: Charles and Typeo or PRINTED NAME OF SIGNING OFFICER OF DIRECTOR A LANE 1-12-96 407-692-3816