

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

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra Et. Mortimer
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P94000042417 (3)**

1. Corporation Name
DRUG FREE COMPLIANCE, INC.



Principal Place of Business: **121 NW 10TH CT BOCA RATON FL 33486**
Mailing Address: **121 NW 10TH CT BOCA RATON FL 33486**

21	22	23	24	25	26	27	28	29	30
2. Principal Place of Business					2a. Mailing Address				
Suite, Apt. #, etc.					Suite, Apt. #, etc.				
City & State					City & State				
Zip		Country			Zip		Country		

3. Date Incorporated or Qualified 06/07/1994	3a. Date of Last Report 04/13/1995
4. FEI Number 65-0498611	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
10. Name and Address of New Registered Agent	

9. Name and Address of Current Registered Agent

**SILVERMAN, IRENE
121 NW 10TH CT
BOCA RATON FL 33486**

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
FL	B5 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature type, or printed name of registered agent and the officer

(Initials) Registered Agent Signature required when registering

Date

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. TITLE	P	<input type="checkbox"/> DELETE	13. 1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SILVERMAN, IRENE		2. NAME	
STREET ADDRESS	121 NW 10TH CT		3. STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33486		4. CITY-ST-ZIP	
TITLE	VPS	<input type="checkbox"/> DELETE	2. 1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SILVERMAN, STUART		2. 2. NAME	
STREET ADDRESS	121 NW 10TH COURT		2. 3. STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL		2. 4. CITY-ST-ZIP	
TITLE		<input type="checkbox"/> DELETE	3. 1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			3. 2. NAME	
STREET ADDRESS			3. 3. STREET ADDRESS	
CITY-ST-ZIP			3. 4. CITY-ST-ZIP	
TITLE		<input type="checkbox"/> DELETE	4. 1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			4. 2. NAME	
STREET ADDRESS			4. 3. STREET ADDRESS	
CITY-ST-ZIP			4. 4. CITY-ST-ZIP	
TITLE		<input type="checkbox"/> DELETE	5. 1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			5. 2. NAME	
STREET ADDRESS			5. 3. STREET ADDRESS	
CITY-ST-ZIP			5. 4. CITY-ST-ZIP	
TITLE		<input type="checkbox"/> DELETE	6. 1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			6. 2. NAME	
STREET ADDRESS			6. 3. STREET ADDRESS	
CITY-ST-ZIP			6. 4. 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Irene Silverman, President*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: **4/2/96**
ELECTRONIC SIGNATURE: **407 338-9276**

CR2E034 (12/95)