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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

P94000055524 (0)

P.S.L. DESIGNER, INC.

Principal Place of Business

Mailing Address

1452-B SEMORAN BLVD CASSELBERRY FL 32707 US

DOCUMENT #
1. Corporation Name

1452-B SEMORAN BLVD CASSELBERRY FL 32707 US



2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For	05		US		3. Date Incorporated or Qualified 3	a. Date of Last Report	
23   S2O N					07/26/1994		
SUIT ACT BE SEMORAN BLVD  11. Pursuant to the provisions of Section 607 0500 and 607 1508. Floride Statutes the above named corporations showld this statement for link purpose of changing is registered agent. I start amount is a registered by the corporation is based to the provisions of Section 607 0508. Floride Statutes who above named corporations showld this statement for link purpose of changing is registered from the provisions of Section 607 0508. Floride Statutes who above named corporations showld this statement for link purpose of changing is registered from the provisions of Section 607 0508. Floride Statutes who above named corporations showld this statement for link purpose of changing is registered from the provisions of section 607 0508. Floride Statutes who above named corporations showld this statement for link purpose of changing is registered from the provisions of section 607 0508. Floride Statutes who above named corporations showld this statement for link purpose of changing is registered from the provisions of section 607 0508. Floride Statutes who above named corporations showld this statement for link purpose of changing is registered from the provisions of section 607 0508. Floride Statutes who above named corporations showld this statement for link purpose of changing is registered from the provisions of section 607 0508. Floride Statutes who above named corporations showld this statement for link purpose of changing is registered from the provisions of section 607 0508. Floride Statutes who above named corporations showld the statement for link purpose of changing is registered agent. I am a statement for link purpose of changing is registered dispersion. I am a statement for link purpose of changing is registered agent. I am a statement for link purpose of changing is registered agent. I am a statement for link purpose of changing is registered agent. I am a statement for link purpose of changing is registered agent. I am a statement for link purpose of changing is registered agent.		NI 114 1 11		1 0-		Applied For	
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29 Altamonte Sorings F7 28 Attamonte Sorings F7 28 Att	22 1158	3	27 158	, J	5. Certificate of Status Desired		
9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  11. Name and Address of New Registered Agent  12. Pursuet the provisions of Sections 607,0502 and 607,1008, Rocks Statutes, the above remaind corporation submitted by the componition of registered agent, or both, in the State of Rocks. Such change was authorized by the componition is been stated what for this purpose of charging its registered disport. I am a state of Rocks. Such change was authorized by the componition is been stated with the provisions of Sections 607,0502 and 607,1008, Rocks Statutes, the above remains opposition submitts this state what for this purpose of charging its registered disport. I am or registered agent, or both, in the State of Rocks. Such change was authorized by the componition's board of directors. I mently except the appointment as registered disport. I am or registered agent, and accept the obligations of, Socion 607,0505, Florida Statutes, the above remains opposition is board of directors. I mently except the appointment as registered disport. I am a state of Rocks and the stat	23 Altan	norte Springs, FZ	IA ] 1	Springs, f			
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LEFCOURT, PETER S 1452-B SEMORAN BLVD CASSELBERRY FL 32707  11. Pursuant to the provisions of Sectors 607.0502 and 607.1508, Florida Statutes, the above named corporation submit the statement for fire jumpose of changing its registered agent, or both, in the State of Florids. 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 obligators of Socious 607.0505, Florida Statutes, the above named corporation submit the statement for fire jumpose of changing its registered agent. I am familiar with, and accept the obligators of Socious 607.0505, Florida Statutes, the above named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligators of Socious 607.0505, Florida Statutes, the above named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligators of Socious 607.0505, Florida Statutes, the above named corporation is beard of directors. I hereby accept the appointment as registered agent. I am familiar with a state of Points. Socious 607.0505, Florida Statutes, the above named corporation is beard of directors. I hereby accept the appointment as registered agent. I am familiar with a state of Points. State of Points. State of Points. Socious vive residue.    12.	<b></b>	9. Name and Address of Current	Registered Agent		10. Name and Address of New Regis	stered Agent	
11. Pursuant to the provisions of Sections 607.0502 and 607.1509, Florids Statutes, the above-named corporation submits this statement for the unprised of changing its registered of or rings/fered agent or both, in the State of Florids. Such change was authorized by the corporation proprietion submits this statement for the unprised of changing its registered agent. I am submits with, and accept the objections of, Section 807.0509, Florids Statutes, the above-named corporation submits this statement for the unprised of changing its registered agent. I am submits this statement for the unprised of changing its registered agent. I am submits this statement for the unprised of changing its registered agent. I am submits this statement for the unprised of changing its registered agent. I am submits this statement for the unprised of changing its registered agent. I am submits this statement for the unprised of changing its registered agent. I am submits this statement for the unprised of changing its registered agent. I am submits this statement for the unprised of changing its registered agent. I am submits this statement for the unprinted agent agent to the unprised of changing its registered agent. I am submits this statement for the unprised agent to the provinces of changing its registered agent. I am submits this statement for the unprised agent to the provinces of changing its registered agent. I am submits this statement for the unprinted agent to the provinces of changing its registered agent. I am submits this statement for the unprised agent to the provinces of changing its registered agent. I am submits this statement for the unprised agent to the provinces are the unprised agent to the unprised agent to the provinces are the unprised agent to the provinces are the unprised agent to the							
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Synahre, byed or privided parties and price as appared and the appointment of the appoi		,	-, cortosco, rionda attitutos.				
12.		Signature, typed or printed name of registered agent a	nd title if applicable (NOTE:	Registered Agent signature req	ured when reinstating)	DATE	
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6.4CITY-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 applied to the formation information informatio		certify that the information supplied with	th this films is voluntarily furnished	ad and does not qualify	for the execution stated in Costion 110 07/0	(A) Florido Cana des 15 di	

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 changen, or on an attachment with an address.

SIGNATURE:

GNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

4/21/96 407-774-86