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CORPORATION ANNUAL REPORT



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

1996 DOCUMENT #

P94000056871 (4)

JVS INFORMATION SERVICES INC.

Principal Place of Business Mailing Address 8396 NW 14TH ST. 8396 NW 14TH ST. CORAL SPRINGS FL 33071 **CORAL SPRINGS FL 33071** 3a. Date of Last Report 3. Date Incorporated or Qualified 08/01/1994 08/23/1995 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 65-0566089 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees  $Z_{\rm IP}$ Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name VENUTO, JOSEPH 82 Street Address (P.O. Box Number is Not Acceptable) 8396 NW 14 ST 83 **CORAL SPRINGS FL 33071** City Zip Code 85 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 DATE (NOTE: Registered Agent eignature required when reinstating) (12/95)12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. □ DELETE Change ■ Addition TITLE 1. 1 TITLE VENUTO, JOSEPH CR2E034 1.2 NAME NAME 8396 NW 14TH ST. STREET ADDRESS 1.3 STREET ADDRESS CORAL SPRINGS FL 33071 C-TY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change T:TLF 2.1 TITLE Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZiP 2.4 CITY - ST- ZIP ☐ DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE TITLE 4. 1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CHIY-SI-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5 1 TITLE Change ☐ Add₁tion NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY - ST - ZIP 54 CITY-ST-ZIP DELETE Change TILLE 6 1 TITLE Addition NAME 62 NAME STHEET ADORESS 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 or finis 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

SIGNATURE:

appears in Block 12 or Block

4/22/96 3053598060