

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P94000080701 (3)**

1. Corporation Name
PERMITTING ASSESSMENT & MANAGEMENT, INC.



Principal Place of Business
14930 S.W. 80TH AVE.
MIAMI FL 33158

Mailing Address

14930 S.W. 80TH AVE.
MIAMI FL 33158

2. Principal Place of Business

21 **1931 S.W. 52nd Terrace**
Suite, Apt. #, etc.

2a. Mailing Address

26 **1931 S.W. 52nd Terrace**
Suite, Apt. #, etc.

22

City & State

23 **Plantation, FL**

Zip

24 **33317**

27

City & State

28 **Plantation, FL**

Zip

29 **33317**

30

Country

9. Name and Address of Current Registered Agent

**KRAUSS, PAMELA
14930 SW 80TH AVE.
MAIMI FL 33158**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

1931 S.W. 52nd Terrace

83

84 City

Plantation

85 Zip Code

33317

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

(NOTE: Registered Agent signature required when re-stating)

Pamela Krauss, President

DATE

12. OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **P**
NAME **KRAUSS, PAMELA**
STREET ADDRESS **14930 S.W. 80TH AVE.**
CITY-ST-ZIP **MIAMI FL 33158**

DELETE

1.1 TITLE

Change

Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

1931 S.W. 52nd Terrace

PLANTATION, FL 33317

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

2.1 TITLE

Change

Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

3.1 TITLE

Change

Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

4.1 TITLE

Change

Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

5.1 TITLE

Change

Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

6.1 TITLE

Change

Addition

6.2 NAME

6.3 STREET ADDRESS

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)(c), 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.

Pamela Krauss - President

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/4/96 (305) 227-2435
Daytime Phone #

CR2E034 (12/95)