

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

1995



STATE OF FLORIDA
DEPARTMENT OF
REVENUE
TALLAHASSEE, FLORIDA

APPROVED
FEB 1995

15 MAY - 1 JUN 95

SECRET
TALLAHASSEE, FLORIDA

DOCUMENT # P94000086593 (8)

1. Name of Applicant

BUSINESS SERVICES INTERNATIONAL, INC.

725 N. A1A, SUITE E206
JUPITER FL 33477

725 N. A1A, SUITE E206
JUPITER FL 33477

3. Date of Application 3a. Date of Filing

11/28/1994

4. FID Number 5. Amount of Additional Fee Required

65-0573448

\$8.75 Additional Fee Required

6. Election Campaign Financing Fund Contribution \$5.00 May Be Added to Fees

8. Any Applicable Penalty for Late Payment of Fees

9. Name and Address of Current Registered Agent

ROSSOW, GERALD Z
725 N. A1A, SUITE E206
JUPITER FL 33477

10. Name and Address of New Registered Agent

81. Name
82. Street Address
83. City
84. State
85. Zip

FL

11. I, the undersigned, hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that I am the duly authorized representative of the applicant for the purpose of filing this application with the Department of Revenue.

12. I, the undersigned, hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that I am the duly authorized representative of the applicant for the purpose of filing this application with the Department of Revenue.

DPST
ROSSOW, GERALD Z
725 N. A1A, SUITE E206
JUPITER FL 33477

13. Additional Information (If any) (If none, check box)

14. I, the undersigned, hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that I am the duly authorized representative of the applicant for the purpose of filing this application with the Department of Revenue.

SIGNATURE:

Gerald Z. Rossow
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/95 (407) 745-2235

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REGISTRATION
AND FILING

1995



FLORIDA
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
FILED

DOCUMENT # P94000087010 (2)

NORTH AMERICAN TECHNOLOGY SERVICES, INC.

SECRETARY OF STATE

TALLAHASSEE, FLORIDA

4820 PARK BLVD.
PINELLAS PARK FL 34665

4820 PARK BLVD.
PINELLAS PARK FL 34665

3. Effective Date of Filing	3a. Filing Fee
11/28/1994	NA
4. File Number	Approval Fee
59-3280529	Not Applicable
5. Check one of the following	\$8.75 Additional Fee Required
6. Check one of the following	\$5.00 May Be Added to Fees
7. Check one of the following	

2. Check one of the following	2a. Check one of the following
21. Check one of the following	26. Check one of the following
22. Check one of the following	27. Check one of the following
23. Check one of the following	28. Check one of the following
24. Check one of the following	29. Check one of the following
25. Check one of the following	30. Check one of the following

9. Name and Address of Current Registered Agent

PATRICK M. O'CONNOR, P.A.
18167 U.S. HWY. 19 N.
SUITE 461
CLEARWATER FL 34624

10. Name and Address of New Registered Agent

81. Name	85. State
82. Street Address of New Registered Agent	
83. City	
84. Zip	FL

11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the foregoing is a true and correct copy of the original as the same appears in the records of the Department of State, and that the same has been filed for the purpose of recording the same in the public records of the State of Florida.

12. Name and Address of Registered Agent	13. Name and Address of Registered Agent
D OBERDING, JACK 4820 PARK BLVD. PINELLAS PARK FL 34665	
D OBERDING, ELIZABETH 4820 PARK BLVD. PINELLAS PARK FL 34665	

14. I, the undersigned, being a resident of the State of Florida, do hereby certify that the foregoing is a true and correct copy of the original as the same appears in the records of the Department of State, and that the same has been filed for the purpose of recording the same in the public records of the State of Florida.

SIGNATURE: *Jack Oberding*
Jack Oberding

813-541-5883

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1995



DOCUMENT # P94000087192 (8)

LAMB CONCRETE, INC.

NOV 11 1994

TALLAHASSEE, FL 32308

ROUTE 3, BOX 327-D
TALLAHASSEE FL 32308

ROUTE 3, BOX 327-D
TALLAHASSEE FL 32308

3. Date of Filing	12/01/1994	3a. Type of Filing	N/A
4. Filing Fee		5. Additional Fee Required	\$8.75
6. Additional Fee Required		7. Additional Fee Required	\$5.00
8. Additional Fee Required		9. Additional Fee Required	
10. Name and Address of New Registered Agent			

9. Name and Address of Current Registered Agent

LAMB, TOMMY
ROUTE 3, BOX 327-D
TALLAHASSEE FL 32308

81. Name	
82. Address	
83. City	
84. State	FL
85. Zip	

11. I, the undersigned, do hereby certify that the foregoing is a true and correct copy of the original document filed for recording in the public records of the State of Florida, and that the same is a true and correct copy of the original document filed for recording in the public records of the State of Florida, and that the same is a true and correct copy of the original document filed for recording in the public records of the State of Florida.

12. Name	D LAMB, TOMMY	13. Name	
Address	ROUTE 3, BOX 327-D	Address	
City	TALLAHASSEE FL 32308	City	
Name	D LAMB, LILLIE	Name	
Address	ROUTE 3, BOX 327-D	Address	
City	TALLAHASSEE FL 32308	City	
Name	D LAMB, MELISSA	Name	
Address	ROUTE 3, BOX 327-D	Address	
City	TALLAHASSEE FL 32308	City	

SIGNATURE:

Tommy Lamb

TOMMY LAMB

4-29-95

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1995



DOCUMENT # P94000087279 (3)

HFC ENTERPRISES, INC.

1431 S OCEAN BLVD #89
POMPANO BEACH FL 33062

1431 S OCEAN BLVD #83
POMPANO BEACH FL 33062

APPROVED

APR 10 25

TALLAHASSEE, FLORIDA

2	2a	3	3a
21	26	11/30/1994	Applied For Not Applicable
22	27	65-0551550	\$8.75 Additional Fee Required
23	28	6. Prescribe Campaign Finance and Trust Fund Contribution	\$5.00 May Be Added to Fees
24	29	6. Prescribe Campaign Finance and Trust Fund Contribution	

9. Name and Address of Current Registered Agent

SCHAUS, ELIZABETH J
1431 S OCEAN BLVD #89
POMPANO BEACH FL 33062

10. Name and Address of New Registered Agent

81	Name
82	Street Address - Post Box Number or Post Office
83	
84	City
FL	85

11. The undersigned hereby certifies that the foregoing information is true and correct and that the undersigned is the duly authorized representative of the corporation, partnership, or other entity for which this statement is being filed. The undersigned further certifies that the corporation, partnership, or other entity is duly organized and in good standing under the laws of the State of Florida.

12.	13.
PD CARTER, HENRY 1431 S OCEAN BLVD #89 POMPANO BEACH FL 33062 STD CARTER, FLORENCE M 1431 S OCEAN BLVD #89 POMPANO BEACH FL 33062	

SIGNATURE:

Henry Carter

April 28 95

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

STATE OF FLORIDA
DEPARTMENT OF REVENUE

1995



OFFICE OF THE COMPTROLLER
OF PUBLIC ACCOUNTS
STATE OF FLORIDA
TALLAHASSEE, FLORIDA 32399-0001

DOCUMENT # P94000087526 (7)

FOR FILING ONLY

FINK & LANE, P.A.

2263 MAIN ST.
FORT MYERS FL 33901

2263 MAIN ST.
FORT MYERS FL 33901

APPROVED
AND
FILED

9 MAY - 1 12:00:06

RECEIVED
TALLAHASSEE, FLORIDA

2. Filing Information		3. Filing Information	
21. Filing Date	22. Filing Time	31. Filing Date	32. Filing Time
23. Filing Office	24. Filing Office	33. Filing Office	34. Filing Office
25. Filing Office		26. Filing Office	
27. Filing Office		28. Filing Office	
29. Filing Office		30. Filing Office	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	

FINK, MICHAEL G
1017 BAL ISLE DR.
FORT MYERS FL 33919

81. Filing Office	82. Filing Office
83. Filing Office	84. Filing Office
85. Filing Office	86. Filing Office

11. I, the undersigned, do hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that I am a duly qualified person to act as a registered agent for the purposes of this act.

Signature: *Michael G Fink* Date: 4-13-95

12. Filing Information	13. Filing Information
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98. Filing Information	99. Filing Information
100. Filing Information	101. Filing Information

14. I, the undersigned, do hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that I am a duly qualified person to act as a registered agent for the purposes of this act.

SIGNATURE: *Jane Runkle Lane* Date: 4-13-95 813 337-1303

APPROVED
AND
FILED

07-00000-1 AMIO:22

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

14308-D DALE MABRY
TAMPA FL 33618

3. DATE	12/02/1994
4. ACCOUNT NO.	57-3273064
5. ACCOUNT TYPE	\$8.75 Additional Fee Required \$5.00 May Be Added to Fines
6. DESCRIPTION	\$8.75 Additional Fee Required \$5.00 May Be Added to Fines
7. REMARKS	
8. LIBRARY	

10. Name and Address of New Registered Agent:

01	1/1/1980
02	Black Adkins, J. L. (1/1/1980) - 1/1/1980
03	
04	FL 05

12. D
BANDEL, RICHARD J
14308-D DALE MABRY
TAMPA FL 33618
D
O'HARA, PATRICK M
19824 GULF BLVD. #3
INDIAN SHORES FL 34635

[illegible]

4. The Commission has also been informed that the Government of India has been requested to provide information on the progress of the implementation of the recommendations of the Commission's report on the subject.

SIGNATURE AND TYPE OR PRINTED NAME OF SECOND OFFICER OR DIRECTOR

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1995



DOCUMENT # P94000088187 (7)

CERTAIN DIAGNOSTIC, INC.

1237 SW 2 ST
APT 4
MIAMI FL 33135

1237 SW 2 ST
APT 4
MIAMI FL 33135

3. 11/30/1994 3a.

4. 65-0540042

5. \$8.75 Additional
Fee Required

6. \$5.00 May Be
Added to Fees

8. X

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

CANIZARES, LUIS B
1237 SW 2 ST
APT 4
MIAMI FL 33135

B1
B2
B3
B4

FL 85 3/24/95

11. *Luis B Canizares*

12. D
CANIZARES, LUIS B
1237 SW 2 ST APT 4
MIAMI FL 33135

13.

14.

SIGNATURE: *Luis B Canizares* 3/24/95

APPROVED
7/10
FILED

APR 10 1968

WINTER / OCTOBER
TALLAHASSEE, FLORIDA

7000 MELROSE CT
PORT RICHEY FL 34668

		3. Date of Birth		12/06/1994		3a. Social Security Number		N/A	
2. Date of Application		2a. Method of Payment		4. City, State, and Zip		5. Contribution of Money Received		8. The undersigned hereby certifies that the information furnished is true and correct.	
21		26		59-3281471		8.75 Additional Fee Required		8. The undersigned hereby certifies that the information furnished is true and correct.	
22		27				5.00 May Be Added to Fees		8. The undersigned hereby certifies that the information furnished is true and correct.	
23		28						8. The undersigned hereby certifies that the information furnished is true and correct.	
24		29		30				8. The undersigned hereby certifies that the information furnished is true and correct.	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KLEMM, RUSSELL E
600 CLEVELAND ST
SUITE 760
CLEARWATER FL 34615

81 Family: RAYMOND B. LABAYEN

02 Street Address, Apt. (See Remarks for Post Office address)
7000 MELROSE CT.

83

PORT RICHEY

FL

85 3466

11. The parent corporation is not a "disqualified person" under Section 513(b)(1)(B) and, therefore, the above described corporation activity, the agreement for the purpose of financing its expanded office and plant operations, is not a "disqualified person" under Section 513(b)(1)(B). The corporation's board of directors, therefore, is not the agreement as requested above.

SEARCHED *[initials]* INDEXED *[initials]* SERIALIZED *[initials]* FILED *[initials]*
- RAYMOND G. LABAYEN, VICE PRES. 4/30/95

12.	13.
DP GACULA, GEORGIANNA 7000 MELROSE CT PORT RICHEY FL 34668 DV	
LABAYEN, RAYMOND G 7000 MELROSE CT PORT RICHEY FL 34668 DS	
FRES, JOSE L 7000 MELROSE CT PORT RICHEY FL 34668 DT	
QUIZON-LABAYEN, MARIA 7000 MELROSE CT PORT RICHEY FL 34668	

[illegible]

SIGNATURE: 
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICIAL OR DIRECTOR
RAYMOND G. LABAYEN, VICE PRESIDENT

4/30/95 (813) 848 5150

1995



HARUNUR, INC.

6708 BERET DR
ORLANDO FL 32809

6708 BERET DR
ORLANDO FL 32809

4. 2. 1. D

155

...the

2	2A	3	3A
21	26	4	4A
22	27	5	5A
23	28	6	6A
24	29	7	7A

9. Name and Address of Current Registered Agent

RASHID, HARUNUR
6708 BERET DR
ORLANDO FL 32809

10. Name and Address of New Registered Agent

81	Source	
82	Edward Addington, 6111 - Police Department, 1942 - Acceptable	
83		
84	City	EL 85 1942 (1942)

11. The undersigned hereby certifies that the foregoing information is true and correct. It is further certified, for the purposes of this document, that the undersigned is a duly qualified and duly appointed member of the Board of Directors of the Corporation.

12.	DPST RASHID, HARUNUR 6708 BERET DR ORLANDO FL 32809	13.	14.
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SIGNATURE:

X *Harold Patrick*

THIS IS TO CERTIFY THAT THE PROPERTY OF NAME OF SUBSCRIBER, THE FIDELITY OF WHICH IS GUARANTEED BY THE

4-28-95 (407) 826-0208