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

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT #

P94000090269 (9)

BILLE	YONDER	SERVICES	CORP

 Principal Place	of Business	Mailing Address			
120 E. OAKLAND PK. BLVD. SUITE 105 WILTON MANORS FL 33334		120 E. OAKLAND PK. (SUITE 105 WILTON MANORS FL 3	- -		
US		US	~~~	 Date Incorporated or Qualified 12/12/1994 	3a. Date of Last Report 01/25/1995
2. Principal Pia	ice of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0504736	Not Applicable
Suite, Apt. #		Suite, Apt. #, etc.	· · · · · · · · · · · · · · · · · · ·	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		Oity & State		6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country		Country	Trust Fund Contribution	Added to Fees
24	25	29	30	8. This corporation has liability for in Florida Statutes	
	9. Name and Address of Cur		T	10. Name and Address of New R	
			B1 Name		
Brede,			82 Street Add	fress (P.O. Box Number is Not Acceptable	e)
	PRPORATE BLVD., NW				
	DI, EAST BLDG.	X	B3		
BOCA R	ATON FL 33431	//	B4 City		85 Zip Code
11 Pursuant to	the provision, of Sections COLD	Vand 107 1509 Florido Cratuta	the share and say	pration submits this statement for the purp	FL
or registere færnhar vær SIGNATUR	ed agen t, or b oth, in the 9 at it, and accept the object is it.	Auch change was authorize ext o 607,0505, Florida Statutes.	d by the corporation's boa	pration submits this statement for the purpart of directors. I hereby accept the apport	intment as registered agent. I am
10	Augustus a suname of the Lo	Gent and life in sable (NOT AND DIRECTORS	E: Registered Agent signature requir	· · · · · · · · · · · · · · · · · · ·	DATE
12. THE	D OTTOCHY,	DELETE	13. 1 1 TITLE	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12 Change Addition
NAME.	FELSTEAD, PHILIP S		12 NAME		Change D Addition
SERELL ADDRESS	P.O. BOX 585 N/A		13 STREET ADDRESS		
CON - ST - ZiP	DEERFIELD BEACH FL 33	443	1.4 CITY - ST - ZIP		
7014		☐ DELĒTĒ	2 1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADORESS			2 3 STREET ADDRESS		
CHY-\$1-70°			2.4 City - St - ZiP		
THEF		DELETE	3 1 TITLE		Change Addition
NAM1			3 2 NAME		
STREET ADDRESS O(TY-ST-ZIE			3.3 STREET ADDRESS		
Titlef		DELFTE	3 4 C/TY - ST - ZIP 4 1 TITLE		Change Addition
NAME			4.2 NAME		Change D Vanion
STREET ADDRESS			4.3 STREET ADDRESS		
City - St - ZiP			4.4 CITY - ST- ZIP		
Tif;E		☐ DELETE	5 1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STEEL LADDRESS			5 3 STREET ADDRESS		
CHY-ST-7F			5 4 CITY - ST - ZIP		
1H, F		☐ DELETE	6 1 TITLE		☐ Change ☐ Addition
NAM(<u></u>	*··· -	6 2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
011	certify that the information supplies	ad with the filling is voluntarily furnis	6.4 CITY-ST-ZIP	for the evenintion stated in Section 140.6	07/09/W Elorida Statidae I fiether
certify that leath; that leappears in	the information indicated or the a ani an officer or director of the of Block 12 or Blocky 3 if changes	ing a solution in an address of the property of the receiver or trustee that an address of the receiver or trustee that an address of the receiver of the rece	al report is true and accura- empowered to execute these.	for the exemption stated in Section 119.0 ate and that my signature shall have the s is report as required by Chapter 607, Flo	দেবালে, দালাতে ভাষাধ্যক: Frurtner same legal effect as if made under rida Statutes; and that my name

SIGNATURE:

SNATURE AND TYPED OF PRINTED SOME OF SIGNING OFFICER OR E

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(/23/96 Daytella Phone •