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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

ANNUAL REPORT 1996		Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # 1. Corporation Name	P9500000	00921 (3)
MATERIAL HANDLII	NG SERVICES, INC.	
Principal Place of Business	Mair	ing Aadress
.720 SW 4TH GT DANA FL 38004 441 HARBOR INDIAN ROCKS	DR SOUTH	720 SW ATH CT DANIA FL 83004 SAME
2. Principal Place of Business		Mailing Address

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DANIA FL S	HARBOR DR. S	DANIA FL 99804		
INDIA	N ROCKS BEI	ACH, FL 3785	AME	3. Date incorporated or Qualified 01/03/1995
2. Principal Plac		2a. Mailing Address 26		4. FELNumber
Suite, Apt. #,	, etc.	Suite, Apt #, etc.		5. Certificate of Status Desired S8.75 Addition Fee Required
City & State		City & State		Election Campaign Financing \$5.00 May Be
3		28		Trust Fund Contribution Added to Fees
Ζιρ	Country	Zιρ	Country	8. This corporation has liability for intangible tax under s. 199 032.
<u> </u>	25	29	30	Florida Statutes Yes No
	9. Name and Address of	Current Registered Agent	81 Name	10. Name and Address of New Registered Agent
			1 1	
	, HOWARD T	46540 30 -	82 Street A	ddress (P.O. Box Number is Not Acceptable)
		ARBOR DR.SO		
-DANIA	FL 33004 INDIAN	ROCKS BEACH,		
	•	3 3 7 8 5	84 City	FL 85 Zip Code
11. Pursuant to	the provisions of Sections 60	07.0502 and 607.1508, Florida Statut	tes, the above named cor	poration submits this statement for the purpose of changing its registered
or registere	ed agent, or both, in the State	of Florida, Such change was authoriz of Section 607.0505, Florida Statute:	zed by the corporation's b s	loard of directors. I hereby accept the appointment as registreed agent, I
GIGNATURE _	Howard.	1. Wody		6/50/9
2.	Significate i types or probabilitation of region. OPE OPE	RS AND DIRECTORS	DTE: Ragistered Ages Usignature re-	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
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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 outh; 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER ORDINECTOR