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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P95000005227 (0)

SPEEDLINE AMERICA CORP.

FILED Apr 11 1997 8:00am Secretary of State



	110	4.4.90 6.1.1								.,
Principal Place of Business 1177 SAWGRASS CORPORATE PKWY SUNRISE FL 33323		Mailing Address								
			1177 SAWGRASS CORPORATE PKWY SUNRISE FL 33323-2847			1				
SOMMOL PL 99	OKO .	ODINIOE (E O	VVEV 4071							
						3. Date Incorporated or C 01/18/1995	Qualified		e of Last f	Report
2. Principal Pa	ace of Business	2a. Mailing Ac	idress			4. FEI Number			A	pplied For
21		26				65-0559904			N	ot Applicable
Suite, Apt #	^y , etc.	Suite, Apt.	#, etc.			5. Certificate of Status De	esired			Additional equired
City & State		City & Stat	te			6. Election Campaign Fina	ancing		\$5.00	May Be
23		28				Trust Fund Contribution	١			to Fees
Zip	Country	Zip		Country	1	8. This corporation has lie				s. 199.032,
24	25	29		30		Florida Statutes		Yes _		
	9. Name and Address of Cui	rrent Registered Agen	t		····	10. Name and Address of	New Reg	istered A	gent	
	CORPORATE SVCS.,			81	Name					
201	South Biscayne Boulev	ard		82	Street Add	dress (P.O. Box Number is Not	Acceptable	9)		
SUIT	E 3000 MIAMI CENTER									
MAIM	AI FL 33131			83	Ī					
				84	City				85 Zip	Code
				107	City	•		FL	les rih	Code
11. Pursuant b	o the provisions of Sections 607. egistered agent, or both, in the S	0502 and 607.1508, Flo	orida Statute	s, the abov	e-named cor	rporation submits this statemen	t for the pu	rpose of	changing i	ts registered
Office or re	egistered agent, or both, in the Si n familiar with, and accept the ot	tate of Florida. Such ch	iange was a	uthorized by	y the corpora	ation's board of directors. I here	eby accept	the appo	intment as	registered
agent car	manista, with, and accept the or	bigations or, bection of	01.0000, 110	ilioa piatuto.	3.					
SIGNATURE	Slane are, twist or periled name of registors:	i agent and life if acrilicable	NOTE	: Registered Ao	ont sionalure ree	ulted when reinstaling)		DATE		
SIGNATURE	Signature, typed or peoled name of registors OFFICERS	of agent and title if applicable AND DIRECTORS	(NOTE	: Registered Ag	uper orulangia Ine	ulted when reinstating) ADDITIONS/CHANGES	TO OFFICE	DATE RS AND	DIRECTO	RS IN 12
		AND DIRECTORS	(NOTE		iper avulangia fne		TO OFFICE		DIRECTOI	
12 .	OFFICERS P	AND DIRECTORS		13. 1.1 TITLE	iper orulangia fne		TO OFFICE			
12. THEF NAME	P BONES, DAVID	AND DIRECTORS		13. 1.1 TITLE 12 NAME			TO OFFICE			
12. THEF NAME SYREET ADDRESS.	P BONES, DAVID 1177 SAWGRASS CORPOR	AND DIRECTORS		13. 1.1 TITLE 1.2 NAME 1.3 STREET	ADDRESS		TO OFFICE			
TITLE NAME SYREET ADDRESS CITY STEZIP	P BONES, DAVID	AND DIRECTORS RATE PKWY		13. 1.1 TITLE 12 NAME	ADDRESS		TO OFFICE			Addition
TILE NAME STREEL ADDRESS CITY: ST. ZIP TILLE	P BONES, DAVID 1177 SAWGRASS CORPOR	AND DIRECTORS RATE PKWY	DELETE	13. 1.1 TITLE 12 NAME 1.3 STREE 1.4 CITY-5 2.1 TITLE	ADDRESS		TO OFFICE		Change	Addition
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SIGNATURE:

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daylime Prione #