


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Jan 22 1998 8:00am  
Secretary of State



DO NOT WRITE IN THIS SPACE

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # P95000007863 (0)

1. Corporation Name

CITY SERVICE GROUP, INC.

Principal Place of Business

634 N.E. 3RD AVE.  
FORT LAUDERDALE FL 33304

Mailing Address

634 N.E. 3RD AVE.  
FORT LAUDERDALE FL 33304

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

25

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

24

Country

29

Zip

Country

9. Name and Address of Current Registered Agent

LOZOFF, MICHAEL D  
HERZFELD & RUBIN  
801 BRICKELL AVE., STE. 1501  
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

D

☐ DELETE

NAME

MARQUARDT, WILLIAM F

STREET ADDRESS

634 N.E. 3RD AVE.

CITY-ST-ZIP

FORT LAUDERDALE FL 33304

TITLE

D

☐ DELETE

NAME

WARD, LAURA

STREET ADDRESS

P.O. BOX 30442 (N/A)

CITY-ST-ZIP

FORT LAUDERDALE FL 33303

TITLE

D

☐ DELETE

NAME

DANZ, GEORGE H

STREET ADDRESS

115 S. ANDREWS AVE., ROOM A540

CITY-ST-ZIP

FORT LAUDERDALE FL 33301

TITLE

D

☐ DELETE

NAME

OBAN, MARCIA

STREET ADDRESS

115 S. ANDREWS AVE., ROOM A680

CITY-ST-ZIP

FORT LAUDERDALE FL 33301

TITLE

D

☐ DELETE

NAME

REATH, TOUCH

STREET ADDRESS

634 N.E. 3RD AVE.

CITY-ST-ZIP

FORT LAUDERDALE FL 33304

TITLE

D

☐ DELETE

NAME

ADAMS, DAMON

STREET ADDRESS

100 N. ANDREWS AVE., FINANCE DEPT.

CITY-ST-ZIP

FORT LAUDERDALE FL 33301

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change

☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

☐ Change

☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change

☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE:



1/6/97

CR2E034 (10/97)