

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

FILED

Apr 29 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000014807 (8)

1. Corporation Name
C.E.I. CUSTOMER SERVICE, INC.



Principal Place of Business
7801 BAY MEADOWS WAY
#4
JACKSONVILLE FL 32236

Mailing Address
7801 BAY MEADOWS WAY
#4
JACKSONVILLE FL 32256-8535

3. Date Incorporated or Qualified 02/22/1995
3a. Date of Last Report 08/19/1996

2. Principal Place of Business
21 1201 NW 65TH PLACE
Suite, Apt. #, etc.

22 City & State
23 FT. LAUDERDALE FL

24 333 09 25 USA 26 1201 NW 65TH PLACE
27 City & State
28 FT. LAUDERDALE FL

29 333 09 30 USA

4. FEI Number 65-0559079
Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

KUNKEL, ROBERT R
444 WHITEHEAD ST
KEY WEST FL 33040

10. Name and Address of New Registered Agent

81 Name APRIL DAWN DESMOND
82 Street Address (P.O. Box Number is Not Acceptable)
1201 NW 65TH PLACE
83
84 City FT. LAUDERDALE FL 85 Zip Code 33309

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 April Dawn Desmond
(NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
P	DESMOND, DAWN A	8787 SOUTHSIDE BLVD. #3810	JACKSONVILLE FL 32250
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP
<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		1486 VERA CRUZ LANE (ADDRESS)	WESTON FL 33327
<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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14. I do 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: April Dawn Desmond
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
4-22-97 954-917-2523
Date Daytime Phone

CR2E034 (9/96)