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

**PROFIT CORPORATION ANNUAL REPORT** 

1997



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT** # P95000018377 (8)

THIRD PARTY SOLUTION INTERNATIONAL, INC.

Principal Place of Business

19771 BW 24TH STREET

Mailing Address

## **FILED** Apr 16 1997 8:00am Secretary of State



DAVIE FL 33	325	COOPER CITY FL 33330-4					
					3. Date incorporated or Qualified 03/07/1995	3a. Date of Last F 05/01/1996	Report
2. Principal Place of Business 2a. Mailing Address			we and		4. FEI Number	<del></del>	pplied For
26 1377 S,		W24 37	nus	65-0562063	<del> </del>	ot Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27 PAVIE - FC				5. Certificate of Status Desired	\$8.75	Additional	
22 27 PAVIE - FC City & State City & State		<u></u>		The Control of Citation Debition	Fee R	equired	
28 33325				6. Election Campaign Financing	\$5.00 May Be		
Zip	Country		Country		Trust Fund Contribution		to Fees
24	25		30 1/3A.		This corporation has liability for in Florida Statutes	ntangible tax under s ] Yes	s. 199.032,
	9. Name and Address of Current	Registered Agent	901 V 70 .		10. Name and Address of New Reg		
LA( 526 CO	82 Stro 83	°CA	MUS CACEMI s (P.D. Box, Number is Not Acceptable S. M. & T. STREE	0 <i>A</i>			
· ;			84 City	DAVI	<u>'</u> _	FL 85 Zp	Code
Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-riamed 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 purit, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE:							
	Signature, typed or printed name of registered agen		: Registered Agent signat	Lure required i	when reinstating)	DATE	·
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTOR	RS IN 12
TITLE	D	☐ DELETE	1.1 TITLE	PAL	310007	Change	Addition S
NAME	MELLO, ANA L		1.2 NAME	ME	110, ANA CHE STAL	7.4- F	[2
STREET ADDRESS	5267 S.W. 116TH TERRACE		1.3 STREET ADDRESS	s /37	iff. The I The	<i>c.</i> /	] [
CITY-ST-ZIP	COOPER CITY FL 33330	DELETE	1.4 CITY - ST - ZIP	400	THE TO 3332	<u> </u>	
NAME	LACERNA, CARLOS	נ] טנגנונ	2.1 TOLE	100	ERDA, CANCOS 1713 W 244 STAN 116 - FL - 37375	Change	Addition C
STREET ADDRESS	13771 SW 24TH STREET		2.2 NAME	LAL	THE STATE	! <b>#</b>	İ
CITY-ST-ZIP	DAVIE FL 33325		2.3 STREFT ADDRESS 2.4 City-St-Zip	121	115 - Fl - 3:337	<u>-</u>	
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STREET ADDRESS			3.3 STREET ADDRESS	s			f
CITY-ST-ZIP			3.4. CITY-\$1-ZIP				
ince :		DELETE	4.1 TITLE			Change	Addition
NAME 31	· I.Mes.	And the second s	4. 2 NAME			-	_
STREET ADDRESS			4.3 STREET ADDRESS	3			
CITY-ST-ZIP			4.4 CHTY - ST - ZIP				
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NAME !			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS	3			
CITY-ST-ZIP		Tours	5.4 CITY- \$1 - ZIP				
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NAME STREET ADDRESS			62 NAME				
STREET ADDRESS			6.3 STREET ADDRESS	· [			
CITY-ST-ZIP	y certify that the information supplied	with this filing does not available	6.4 City - St - ZiP	1	Continue 440 07/03/13 Electric 6:		

Information indicated on this annual report or suppliermental annual report is rue and accurate and that my signature shall have the same legal effect as if made under oath; that an 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.