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

PROFIT CORPORATION ANNUAL REPORT



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

1996

| 1. Corporation | SERVICES, INC. | 95000020817 | (9) | |
|--|--|--|---|---|
| Principal Place 12973 CALA PALM BEAC | | Mailing Address 12973 CALAIS CIR PALM BEACH GAI | | |
| | | | | 3. Date Incorporated or Qualified 3a. Date of Last Report 03/14/1995 |
| 2. Principal Pl | lace of Business | 2a. Mailing Address | | 4. FEI Number Applied For |
| 21 | | 26 | | 65-0564869 Not Applicable |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc | | 5. Certificate of Status Desired \$8.75 Additional Fee Required |
| City & State | e | City & State | | 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees |
| Zip | Country | Zip | Country | This corporation has liability for intangible tax under s 199.032, |
| 24 | 25 | 29 | 30 | Florida Statutes 🙀 Yes 🔲 No |
| | 9. Name and Address | of Current Registered Agent | | 10. Name and Address of New Registered Agent |
| DOONE | D MOULE L | | 81 Name | |
| | R, MICHAEL J | um. | 82 Street A | Address (P.O. Box Number is Not Acceptable) |
| SUITE 1 | alm Beach Lakes bl | VD. | 63 | |
| | M BEACH FL 33401 | | 63 | · |
| ** 1 // // | M DENOTITE SOTOT | | 84 City | FL 85 Zip Code |
| 11. Pursuant | to the provisions of Section | s 607.0502 and 607.1508. Florida St. | atutes, the above-named co | moration submits this statement for the numose of changing its registered office |
| or register | red agent, or both, in the St | ate of Florida. Such change was auth ns of, Section 607,0505. Florida Stati | orized by the corporation's b | poard of directors. I hereby accept the appointment as registered agent. I am |
| SIGNATURE | m, and dooopt the congutte | no or, cooler our lood, monda otal | 3(63, | |
| SIGNATURE . | Signature, typed or printed name of re | agistered agent and title if applicable. | (NOTE: Registered Agent signature re- | guired when reinstaling) DATE |
| 12. | OFF | ICERS AND DIRECTORS | 13. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition |
| TITLE | PRESIDENT | ☐ DELETE | 1. 1 TITLE | ☐ Change ☐ Addition |
| NAME | ROSEMARIE C | ELANTANO | 1.2 NAME | [절 |
| STREET ADDRESS | 12973 CALAI | S CIRCLE | 1.3 STREET ADDRESS | الآر |
| CHY-ST-ZIP TITLE | PALM BEACH | GARDENS, FL 33410 | 1.4 CITY - \$1 - ZIP | Character C |
| NAME | | | 2.1 TITLE | Change Addition |
| STREET ADDRESS | | | 2.2 NAME | |
| CiTY-ST-ZiP | | | 2.3 STREET ADDRESS | |
| TILE | | DELETE | 2.4 C(TY - ST - Z(P 3. 1 T(TLE | Change Addition |
| NAME | 1 | | 3.2 NAME | |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | |
| C(TY-S1-Z(P | | | 3.4 CITY - ST - ZIP | |
| TITLE | | ☐ DELETE | 4. 1 TITLE | ☐ Change ☐ Addition |
| NAME | | | 4.2 NAME | |
| STREET ADDRESS | İ | | 4.3 STREET ADDRESS | · |
| CITY - ST - ZIP | | | 4.4 CITY - ST - ZIP | |
| THILE | | ☐ DELETE | 5. 1 TITLE | ☐ Change ☐ Addition |
| NAME | | | 5.2 NAME | |
| STREET ADDRESS | | | 5 3 STREET ADDRESS | |
| CITY-ST-ZIP | | | 5.4 CITY-ST-ZIP | |
| TITLE | | ☐ DELETE | 6. 1 TITLE | Change Addition |
| NAME | | | 6.2 NAME | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | I | | 6.4 City-St-ZiP furnished and does not quali | |

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: ROSEMARIE CELENTANO PRESIDENT

Lector Jesemeni Celendano 4/23