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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000021129 (8)

1. Corporatio			ELESERVICES,).	-)								
Principal Place of Business Mailing Address											I TOURISH THE IDEAS BOILE BUILT BOILE BOILE		ODS HADAN HADAN ANS	
2663 E. SUNRISE BLVD. 2663 E. SUNRISE BLVD.														
SUITE 230					SUITE 230									
FORT LAUDERDALE FL 33304					FORT LAUDERDALE FL 33304				DO NOT WRITE IN THIS SPACE					
										Date Incorporated or Qualified 03/13/1995				
2. Principal P	lace of Busi	ness		⊢	26. Mailing Address					4.	. FEI Number		ļ	plied For
Suite, Apt. #, etc.					Suite, Apt. #, etc.					↓ _	65-0566656	~		ot Applicable
22 Suite, Apt.	W, GIO.			-	27					5.	Certificate of Status Desired		\$8.75 / Fee Re	Additional equired
City & Stat	0			*	City & State				6.	Election Campaign Financing		\$5.00		
23				2	28				-	Trust Fund Contribution		Added		
Zip Country								Country			. This corporation owes or has paid	the cu	irrent year Int	angible
24	25				29 30						Personal Property Tax due June 3	· ·		No
			Address of Curre	nt Re	egistered Agent					10	Name and Address of New Regi	stered	Agent	
MOYLE, BERNARD T ESQ.							81	81 Name						
BENSON, MOYLE & CHAMBERS						82	Street Addres		ss (l	P.O. Box Number is Not Acceptable)			
ONE FINANCIAL PLAZA, SUITE 1600 FORT LAUDERDALE FL 33394								+						
1	IKI LAUUE	HUA	LE FL 33394				83	1						
								Ī	City			FL	85 Zip (Code
11. Pursuant	to the provis	ions	of Sections 607.050)2 and	d 607.1508, Florida Sta	atutes,	the abov	.L. /0-	named corpo	ratio	on submits this statement for the pur			s registered
office or r agent. I a	registereti aç <u>ım famili</u> a w	gent, ith , a	or both, in the State and accept the oblig	of FI O lion	lorida. Such change wa ≋çıf, Section 607.0505,	as aut , l'Ioric	horized b la Statute	y t	the corporation	on's	on submits this statement for the pur board of directors. I hereby accept	the ap	pointment as	registered
SIGNATURE	\/	\ 1	9-7	_~	LC									
12,	Signature, types	10-70	OFFICERS AN			NOTE : R		eni	il signature recuire		n reinstaling) ADDITIONS/CHANGES TO OFFICE	DATE	D DIDECTOR	O IN 10
TITLE	D		OFFICE NS AN	IL CH	DELETE		13.		T		ADDITIONS/CHANGES TO OFFICE	HS AN	Change	Addition
NAME		Y. T	HOMAS				1.2 NAME						oago	
NAME LINDSEY, THOMAS STREET ADDRESS 2663 E. SUNRISE BLVD., #23								1.3 STREET ADDRESS						
CITY-ST-ZIP			ERDALE FL 3330					1.4 CITY-ST-ZIP						
TITLE					DELETE		2.1 TITLE	<u> </u>					Change	Addition
NAME							2.2 NAME							
STREET ADDRESS							2.3 STREE	1 A	ADDRESS			*		
CITY-ST-ZIP							2. 4 CITY-	ST	1-7IP					
TITLE					☐ DELETE	\neg	3.1 TITLE						Change	Addition
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STREET ADDRESS	}						5.3 STREE		IDORESS					
CITY-ST-ZIP	1						5.4 CITY-							
TITLE					DELETE	-	6.1 TITLE	υI.,	E11				Change	Addition
NAME					-		6.2 NAME						-	
STREET ADDRESS							63 STREE		ODRESS					
OTV 67 710	l													

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 collocation 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 or an attachment with an address.

SIGNATURE: The XXX Thomas CINDSEY

CR2E034 (10/97)

FILED

May 06 1998 8:00am

Secretary of State