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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Jan 28 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
Division OF CORPORATIONS

1997 DIVISION OF DOCUMENT # P95000030963 (9)

STASA SERVICES, INC.

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Principal Place of Business Mailing Address 600 CORPORATE DRIVE STE 450 600 CORPORATE DRIVE STE 450									
LAUDERDALE FL	. 33334	LAUDERDALE FL 333344	3606						
					3. Date Incorporated or Qualified 04/20/1995		ate of Last 01/1996		
2. Principal Plac	ce of Business	2a. Mailing Address	· ·······		4. FEI Number	T 4-1		Applied For	
21		26			! AE AE 7A 7AP		Not Applicable		
Suite, Apt. #, etc. 22		Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State		City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip 24	Country 25	Ζιρ 29	Cour	ntry	8. This corporation has liability for in Florida Statutes	tangible Yes	tax under		
		of Current Registered Agent			10. Name and Address of New Reg	stered /	Agent		
	, FERNANDO			81 Name					
600 CORPORATE DRIVE STE 450 LAUDERDALE FL 33334				82 Street Address (P.O. Box Number is Not Acceptable)					
				83					
				84 City		FL		Code	
 Pursuant to office or reg agent. I am 	the provisions of Section gistered agent, or both, in familiar with, and accept	ns 607.0502 and 607.1508, Florida Statu The State of Florida. Such change was It the obligations of, Section 607.0505, F	ites, the ab authorized lorida Sta	ove-named cor I by the corpora ites.	poration submits this statement for the pution's board of directors. I hereby accept	rpose of the app	changing ointment a	its registered is registered	
SIGNATURE 5	gnature, typed or ported name of	registered agent and tills if applicable. (NO	TE: Registere	Agent signature requ	ired when reinstating)	DATE			
12.		ICERS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	RS AND	DIRECTO	RS IN 12	
,,,,,,	D CALLA FEDURADO	DELETE	11	£			Change	Addition	
	SAMA, FERNANDO 600 CORPORATE DR	NE STE 450		AE .					
DINET PEDDICO	LAUDERDALE FL 333			EET ADDRESS					
CITY-ST-7:P TITLE	ENOULTIDALE 1 E 300	DELETE		Y-ST-ZIP F			Change	Addition	
NAME				ME.			L_J Unange	() Mudition	
STREET ADDRESS				EET ADDRESS					
CITY-ST-ZIP			2.3	Y-ST-ZIP		**			
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NAME			3.2	E					
STREET ADDRESS			3.3	et address		* 1			
CITY-ST-ZIP			3.4	·SI-ZIP	•				
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TITLE		T DETEIL	5.				Change	Addition	
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STREET ADDRESS			5.3	ET ADDRESS					
CITY-ST-ZIF TITLE		☐ DELETE	6.1	ST-ZIP			Change	Addition	
NAME		hand or see the	6.21	[roundh	
STREET ADDRESS				eet address					
CITY-S1-ZIP			640	1					
14. I do hereby	certify that the information	on supplied with this filing does not qua	lify for the	xemption state:	d in Section 119.07(3)(i), Florida Statutes	. I further	certify the	it the	
information Lam an offic	indicated on this arinual cer or director of the corp	report or surpresental annual report is poration or the receiver or trustee empor happed, or on an attachment with an ac	true and wered to	curate and tha	t my signature shall have the same legal ort as required by Chapter 607, Florida St	effect as	if made u	nder oath: tha	
SIGNATU	IRE:	Jeans Lan	10	ŧ J					
	SIGNATURE AR	ND TYPED OR PRINTED NAME OF SIGNING OFFICE	H ORIDINEC	be	Date	Oa	viima Phone d		