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PROFIT
CORPORATION
ANNUAL REPORT
1997

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

FILED
May 20 1997 8:00am
Secretary of State

DOCUMENT # **P95000032868 (8)**

1. Corporation Name
INTERSTATE P.M. SERVICES, INC.

Principal Place of Business:
9400 LIVE OAK PL.
#101
FT. LAUDERDALE FL 33324

Mailing Address:
9400 LIVE OAK PL.
#101
FT. LAUDERDALE FL 33324-4707

3. Date Incorporated or Qualified: **04/24/1995**
3a. Date of Last Report: **06/20/1996**

2. Principal Place of Business
21 Suite, Apt. #, etc
22 City & State
23 Zip
24 Country 25

2a. Mailing Address
26 Suite, Apt. #, etc
27 City & State
28 Zip
29 Country 30

4. FEI Number: 65-0576767 [ ] 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**
KEYES, WANDA M
9400 LIVE OAK PL.
#101
FT. LAUDERDALE FL 33324

10. **Name and Address of New Registered Agent**
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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
Signature (type or print name of registered agent, if registered agent is a business entity) (both if Registered Agent signature required when changing) DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	[ ] DELETE
NAME	KEYES, WANDA M	
STREET ADDRESS	9400 LIVE OAK PL., #101	
CITY-ST-ZIP	FT. LAUDERDALE FL 33324	
TITLE	STD	[ ] DELETE
NAME	KEYES, RAYMOND W	
STREET ADDRESS	9400 LIVE OAK PL., #101	
CITY-ST-ZIP	FT. LAUDERDALE FL 33324	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	[ ] Change	[ ] Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	[ ] Change	[ ] Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	[ ] Change	[ ] Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	[ ] Change	[ ] Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	[ ] Change	[ ] Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	[ ] Change	[ ] Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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

CR2E034 (9/96)