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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000041970 (1)

HIGHLAND SERVICES GROUP, INC.

Principal Place of Business Mailing Address

1890 N.E. 210 STREET 1890 N.E. 210 STREET
MIAMI BEACH FL 33179 MIAMI BEACH FL 33179-1519

## FILED May 13 1997 8:00am Secretary of State



1890 N.E. 210 STREET MIAMI BEACH FL 33179					1890 N.E. 210 STREET Miami Beach Fl 33179-1519											
										3.				e of Last F	of Last Report	
2. Principal Place of Business					2a. Mailing Address					4.	F£I Number				oplied For	
21					26					İ	65-058544	4		<u> </u>	ot Applicable	
Suite, Apt. #, etc.					Suite, Apt. #, etc.						Certificate of St	atus Donirod		\$8.75	Additional	
22				27	***						Cermicate of St	atus Desired		Fee R	equired	
City & State					City & State					6.	6. Election Campaign Financing \$5.00 May Be					
23				28							Trust Fund Contribution Added to Fees					
Zip	Country				han i kana			untry	ntry		This corporation	n has liability for i	intangible	nx under s	. 199.032,	
24		25	· · · · · · · · · · · · · · · · · · ·	29			30	r			Florida Statutes		Yes			
			dress of Currer	n Regi	stered /	Agent		Bí	1	10.	Name and Add	iress of New Re	gistered A	gent		
	DNICKI, RIC							61	Name						j	
1890 NW 210TH ST.					82 Street /			Address (P.O. Box Number is Not Acceptable)								
MIAMI FL 33179								_								
								83	Ì							
								84	City				E)	<b>85</b> Zip	Code	
11, Pursuant t	o the provision	ons of S	octions 607,050	)2 and	607.150	8, Florida Stat	utos, the a	l abov	L c-named	corporatio	n submits this st	atoment for the p	ourpose of	dl. changing i	ts registered	
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, typed o	v printed n	ame of registered age	of and fi	c if applica	ible (Ne	Oh Rogister	ed Age	ent signature	required when	reinstating)		JIAG			
12.			OFFICERS AN	D DIRE	CLORS		13.			,	ADDITIONS/CHA	NGES TO OFFIC	ERS AND	DIRECTOR	RS IN 12	
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CITY-ST-ZIP	MIAMI FL	33179		•				1.4 City - St - ZiP							ſ	
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4. I do hereby certify that the information supplied with this filing does not quality 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 tam 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 12 if changed, or gry an attachment with an address.

ICHIATURE Survey of Madricki SGU Podricki 4/28

4/28/97 205 680-199