SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DOCUMENT # P95000051597 (9)

Corporation Name									•
ALLIED CEDVICE OF	OH III	D	ILL	\sim					

ALLIED SERVICE GROUP, INC.				
Principal Place of Business	Mailing Address		T TORRIDON HIM TO THE BORFE BOND	I BRIDI BRIBI BINGH 1100k GINIB IBIN 1864 IRBI
400 10TH ST SW VERO BEACH FL 32962	P.O. BOX 7146 VERO BEACH FL 32961			
			 Date Incorporated or Qualifie 06/29/1995 	d 3a. Date of Last Report
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 1535-56 th Square Eas			59-3326688	Not Applicable
Suite, Apt #, etc	Suite Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State 23 Vero Brach, FL	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Zıp	Country	8. This corporation has hability f	or intang ble tax under s. 199 032.
24 32966 25 USA	29	30	Florida Statutes	Yes No
9. Name and Address of Cu	rrent Registered Agent	81 Name	10. Name and Address of New	Registered Agent
FERGUSON, ANDREW J 400 10TH ST SW VERO BEACH FL 32962		82 Street A 153	le V. Dawkins ddress (B.O. Box Number is Not Accep 15-56-2 Square Ea o Beach	FL 85 Zip Code 32966
Pursuant to the provisions of Sections 607 office or registered agent, or both, in the Si agent. I am familiar with and accept the of SIGNATURE	av Li	es, the above-named or authorized by the corpo- orida Statutes.	orporation submits this statement for the ration's board of directors. Thereby acc	purpose of changing its registered ept the appointment as registered. 6-6-96
Signatine, typed or profied name of registere		*E. Riegistered Agent signature n		DAIF
12. OFFICERS	AND DIRECTORS DELETE	13.		FICERS AND DIRECTORS IN 12 Change Addition
•	Dettile	1.2 NAME	P Dowkins	Onlings D Addition
STREET ADDRESS 400 10TH ST SW		1.3 STREET ADDRESS	Dale V. Daguare East	ı.
CITY-S1-ZIP VERO BEACH FL 32962		1.4 City - St - ZiP	Dale V. Dawkins 1535-56th Square East Vero Brach, FL 329	le le
TOTLE	DELETE	2 1 TITLE		Change Addition
NAME	_	2 2 NAME		- "
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP		2 4 CITY - ST - ZIP		
TITLE	DETELE	3 1 TILLE		Change Addition
NAME		3 2 NAME		ļ
STREET ADDRESS		3 3 STREET ADDRESS		
CITY-ST-ZIP		3.4 CITY-SI-ZIP		
TITLE	DETEIE	4 1 TITLE		Change Addition
NAME		4 2 NAME		
STREET ADDRESS		4 3 STREET ADDRESS		
CITY-ST-ZIP TITLE	DELETE	4 4 CITY - ST - ZIP 5 1 TITLE		Change Addition
	L. otter	52 NAME		
NAME STREET ADDRESS		5 3 STREET ADDRESS		
City-SI-ZiP		54 CITY-ST-ZIP		
TITLE	DELETE	61 TITLE		Change Addition
NAME		62 NAME		
STREET ADDRESS		63 STREFT ADDRESS		
CITY-ST-ZIP		6.4 CHY - ST-ZIP		
14. Ldo boroby portify that the information eye	plied with this filing is voluntarily fu	traiched and done not o	qualify for the exemption stated in Section	on 119.07(3)(k), Fiorida Statutes. I
further certify that the information indicates made under oath, that I am an officer or dithat my name appears in Block 12 or Block	o on this annual report or supplementation of the corporation or the reck 13 if changed, or an an attachme	ental annaat réport is tri eiver er trustee empowi nt with an address	ue and accurate and that my signature : ered to execute this report as required b	snai nave the same legal effect as it by Chapter 617, Florida Statutes, and

6-6-96 (561)778-2031