

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # P95000052518 (4)

1. Corporation Name  
**MOLDEN SERVICES, INC.**



Principal Place of Business: 205 EAST JOEL BOULEVARD, LEHIGH ACRES FL 33936  
Mailing Address: POST OFFICE BOX 1361, LEHIGH ACRES FL 33970

3. Date Incorporated or Qualified: 07/07/1995  
3a. Date of Last Report

2. Principal Place of Business: 200 W. Leeland Heights Blvd, Lehigh-Acres FL 33936  
2a. Mailing Address: Suite, Apt. #, etc.  
23. City & State: Lehigh-Acres FL  
24. Zip: 33936

4. FEI Number: 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  
THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent  
81 Name: Heinz PFLUNER  
82 Street Address: 613 L'HOMME DIEU ST.  
83  
84 City: Lehigh-Acres FL 85 Zip Code: 33936

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 607.0502, Florida Statutes.

SIGNATURE: [Signature] DATE: 4/15/96

12. OFFICERS AND DIRECTORS		DELETED
TITLE	PSTD	<input type="checkbox"/> DELETE
NAME	PFUNER, HEINZ	
STREET ADDRESS	205 EAST JOEL BOULEVARD	
CITY-ST-ZIP	LEHIGH ACRES FL 33936	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		Change	Addition
1.1 TITLE	VSTD	<input checked="" type="checkbox"/>	<input type="checkbox"/>
1.2 NAME	PFUNER, HEINZ		
1.3 STREET ADDRESS	200 W. Leeland Heights Blvd.		
1.4 CITY-ST-ZIP	Lehigh-Acres FL 33936		
2.1 TITLE	P	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.2 NAME	KEUSCHNIG, KARIN		
2.3 STREET ADDRESS	200 W. Leeland Heights Blvd.		
2.4 CITY-ST-ZIP	Lehigh-Acres FL 33936		
3.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP	000001779640		
5.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP	-04/15/96--01028--010		
6.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP	***200.00		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information included 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, changed, or in any agreement with an address.

SIGNATURE: [Signature] VICE PRESIDENT 01/15/96 941-369-8389

CR2E034 (12/95)