

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 # P95000078892 (3)

1. Corporation Name

ARMSTRONG ACCOUNTING, INC.



Principal Place of Business

2537 FLAMINGO LN  
FT LAUDERDALE FL 33312

Mailing Address

2537 FLAMINGO LN  
FT LAUDERDALE FL 33312

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

10/11/1995

3a. Date of Last Report

4. FEI Number

45-0558130

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

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

ARMSTRONG, ELLEN L  
2537 FLAMINGO LN  
FT LAUDERDALE FL 33312

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5 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, typed or printed name of registered agent and if not applicable

(If the Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

12.1 TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
DPST  
ARMSTRONG1, ELLEN L  
2537 FLAMINGO LA  
FT LAUDERDALE FL 33312

☐ DELETE

12.2 TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

12.3 TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

12.4 TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

12.5 TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

12.6 TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

13.

13.1 TITLE  
13.2 NAME  
13.3 STREET ADDRESS  
13.4 CITY - ST - ZIP

13.5 TITLE  
13.6 NAME  
13.7 STREET ADDRESS  
13.8 CITY - ST - ZIP

13.9 TITLE  
13.10 NAME  
13.11 STREET ADDRESS  
13.12 CITY - ST - ZIP

13.13 TITLE  
13.14 NAME  
13.15 STREET ADDRESS  
13.16 CITY - ST - ZIP

13.17 TITLE  
13.18 NAME  
13.19 STREET ADDRESS  
13.20 CITY - ST - ZIP

13.21 TITLE  
13.22 NAME  
13.23 STREET ADDRESS  
13.24 CITY - ST - ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone

4-15-96 954-587-9385