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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Country

9. Name and Address of Current Registered Agent

25

1996

P95000087076 (2) **DOCUMENT #**

DAVIS & PECKE ACCOUNTING AND FINANCIAL SERVICES **INCORPORATED**

Principal Place of Business Mailing Address 4717 47TH WAY 4717 47TH WAY WEST PALM BEACH FL 33407 WEST PALM BEACH FL 33407 2. Principal Place of Business 2a. Mailing Address 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. 22 27

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City & State

Zip

DAVIS, VANESSA > 4717 47TH WAY **WEST PALM BEACH FL 33407**

City & State

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ountry	8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ☐ Yes ☐ No
L	10. Name and Address of New Registered Agent
81	Name Keith A. James
82	Keith A. James Street Address (P.O. Box Number is Not Acceptable) 1655 Palm Beach Lakes Blvd.
83	Suite 810, Tower C
84	West Palm Beach FL 85 Zip Code 33401

3. Date Incorporated or Qualified 11/14/1995

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

4. FEI Number

3a. Date of Last Report

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

507.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am tions of, Section 607.0505, Florida Statutes. 11. Pursuant to the provisions 9 or registered agent, or both familiar with, and accept the Hullme

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SIGNATURE: _			7/24/46
		Registered Agent signature in	
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	Président/Treasurer □ ŒŒŒ	1 1 THTLE	· Change C Addition
NAME	Vanessa Davis	1.2 NAME	
STREET ADDRESS	4717 47th Way	1.3 STREET ADDRESS	
CITY-ST-ZIP	West Palm Beach, FL 33407	1.4 CHY- ST-ZIP	
TITLE		2 1 TITLE	☐ Change ☐ Addition
NAME	Vice-President/Secretary	2 2 NAME	
STREET ADDRESS	Mark Pecke	2.3 STREET ADDRESS	
CITY-ST-ZIP	1788 N.W. 65th Street	2.4 CITY-ST-ZIP	
TITLE	Miami, FL 33147	3.1 TITLE	Change Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3. STREET ADDRESS	
CITY-S1-ZIP		3.4 CHY- \$1-2IP	
TITLE	DELETE	4.1 TITLE	Change Addition
NAME		4.2 NAME	Lad Ondrigo
,		12 11 11 2	
STREET ADDRESS		4.3 STREET ADORESS	300001810633
CITY-ST-ZIP	Fin the fire	4.4 CITY - ST - ZIP	ACASSASS ASSESSED ASS
TITLE	☐ DELETE	5. 1 THTLE	***200.00
NAME		5.2 NAME	~
STREET ADDRESS		5 3 STREET ADDRESS	\ (1
CITY - ST - ZIP		5.4 CITY - ST - ZIP	100
TITLE	☐ DELETÉ	6. 1 TITLE	☐ Charlige ☐ Addition

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 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.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFF

April 25, 1996 (407) 697-8486 Ancesa Davis