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

1996

DOCUMENT # P95000091733 (2)

MICRO BUSINESS SOLUTIONS, INC.				
Principal Place of Business		Mailing Address		4 (40)(40) 410 (613) 6114 56111 66111 93111 65110 16161 11611 11611 11610 1111 1001
1810 LAKELAND HILLS BOULEVARD LAKELAND FL 33805		1810 LAKELAND HILLS BOULEVARD LAKELAND FL 33805		
				3. Date Incorporated or Qualified 3a. Date of Last Report 11/29/1995
2. Principal Pla	ce of Business	2a. Mailing Address		4. FEI Number Applied For Not Applied by
21		26		65 - 06 2921 Not Applicable \$8.75 Additional
Suite, Apt. #	, elc.	Suite, Apt. #, etc		5. Certificate of Status Desired Fee Required
22 Oity & State		City & State		6. Election Campaign Financing \$5.00 May Be
22		28		Trust Fund Contribution Added to Fees
	Country	Zip	Country	This corporation has liability for intangible tax under s 199.032, Florida Statutes
24	25	29	30	Florida Statutes MY Yes No 10. Name and Address of New Registered Agent
	9. Name and Address of Curre	nt Hegistered Agent	B1 Nanie	To. Haile and Address of feel freguence right.
ATTAWAY, JOHN A JR			1 1	dress (P.O. Box Number is Not Acceptable)
	r, John a Jr E Morton Drive		82 Street Add	uress (P.O. DOX Number is not acceptable)
l .	D FL 33801		83	
DAVEDAN	D11 33001		84 City	85 Zip Code
				FL
or registere familiar wit	ed agent, or both, in the State of Flor h, and accept the obligations of, Sec	ida Such change was authoriz Lon 607.0505, Florida Statutes	es, the above-named corporation's bo	oration submits this statement for the purpose of changing its registered office bard of directors. Thereby accept the appointment as registered agent. I am
SIGNATURE ,	Signature, typed or pointe (manial of registers) tage:		ME. Rog dared Agent Equation sediu	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.		ID DIRECTORS	13.	Change Addition
TITLE	D SANTEDO EMILIO E AD		1.2 NAME	
NAME	Montero, emilio f Jr 1810 lakeland Hills Boui	E3/AD/S	1.3 STREET ADDRESS	
STREET ACCRESS	LAKELAND FL 33805	TIME	1.4 CITY - ST - ZIP	
CITY - ST - ZIP	EARLEMAN I E GOOD	DELETE	2 1 TIILE	Change Addition
NAME	-		2 2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
City-S1-7-P			2.4 C/TY ST-Z/P	
THILE		☐ DEL € T€	3 1 TITLE	☐ Charge ☐ Addition
NAME			3 2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP		TT DELETE	3 4 CITY - ST - ZIP 4 1 TITLE	Change Addition
TITLE		□ perete	4.2 NAME	- Company Company
NAME			4.3 SEREET ADDRESS	
STREET ADDRESS			4 4 CITY-S'-Z-P	
CITY-ST-ZIP TITLE		DELETE	5 : 101.6	Change Addit on
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADORESS	
CITY-ST-ZIP			5 4 CITY ST-ZIP	
TITLE		☐ DELETE	6.111(f	Change Addition
NAME			6.2 NAME	
STHEET ADDRESS			63 STREET ADDRESS	

64 CITY ST-ZIP 14. If 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 armual 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

STREET ADDRESS

SIGNATURE: IN LA T. WANT TO SIGNATURE AND TYPED OR PRINTED YAME OF SIGNING OFFICER OR DIRECTOR

4/29/96 941/680-1406