## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

CHTY-ST-ZIP

STREET ACCORESS

SIGNATURE:

CITY-ST-ZIP

TICLE



FLORIDA DEPARTMENT OF STATE

FILED

Apr 07 1997 8:00am

Secretary of State

Change

Addition

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9600003331 (1)

## NATIONAL BUYING SERVICE, INC.

Principal Place of Business Mailing Address **805 LAKE VISTA COURT 805 LAKE VISTA COURT** NAPLES FL 33963 NAPLES FL 34108-8235 3. Date Incorporated or Qualified 3a. Date of Last Report 01/08/1996 NONC 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65- 0632487 Not Applicable 26 21 Suito, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032. Yes No 24 30 25 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name 81 CURBOW, MARK W 805 LAKE VISTA COURT Street Address (P.O. Box Number is Not Acceptable) 82 NAPLES FL 33963 34108 83 City 84 Zip Code B5 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 prith, and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 OFFICERS AND DIRECTORS (96/6) 13. PSTD DELETE 1.1 TITLE Change \_\_\_ Addition THUE CURBOW, MARK W NAME 12 NAME 805 LAKE VISTA COURT STREET ADDRESS 1.3 STREET ADDRESS NAPLES FL 33963 1.4 CITY - ST - 2IP CITY - ST - 70° 7111.6 DELETE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CHY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition THILE 3.1 TITLE 3.2 NAME STREET ADORESS 3.3 STREET ADDRESS 3.4. CITY - ST-ZIP  $CHY \circ S1 \cdot Z(f)$ DELETE Addition THE 4.1 TITLE NAME 4. 2 NAM8 STREET ADDRESS 43 STREET ADDRESS CHY S1-ZIP 4.4 CiTY-ST-ZiP DELETE 5.1 TITLE Change Addition TILLE NAMS 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

63 STREET ADDRESS

6.4 CITY-ST-ZIP

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

6.1 TITLE 6.2 NAME

14. I do he ety certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the

DELETE

appears in Block 12 or Block 13 if changed, or on an attachment with an address