

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED

97 AUG -4 PM 3:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000023895 (1)
1. Corporation Name
COM-VEST, INC.

Principal Place of Business 8902 NO DALE MABRY HIGHWAY STE 214 TAMPA FL 33614	Mailing Address 8902 NO DALE MABRY HIGHWAY STE 214 TAMPA FL 33614
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/13/1996	3a. Date of Last Report
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-3366333	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

EILERS, LORRIE N
8902 NO DALE MABRY HIGHWAY STE 214
TAMPA FL 33614

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	NORD, JOHN	1.2 NAME	
STREET ADDRESS	8902 NO DALE MABRY HIGHWAY STE 214	1.3 STREET ADDRESS	800002261058--0
CITY-ST-ZIP	TAMPA FL 33614	1.4 CITY-ST-ZIP	-08/07/97--01101--009
TITLE	D ☐ DELETE	2.1 TITLE	***165.00 ☐ ***165.00
NAME	HEINRICH, KIM N	2.2 NAME	
STREET ADDRESS	2131 WILLOW LAUREN LANE	2.3 STREET ADDRESS	
CITY-ST-ZIP	WINDERMERE FL 34786	2.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	EILERS, LORRIE N	3.2 NAME	
STREET ADDRESS	2609 CARROLL LAKE STREET	3.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL 33618	3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby 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 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.

SIGNATURE

John Nord, Pres
SECRETARY OF STATE

7/21/97

813-932-4600

CR2E034 (4/97)

JOHN NORD, P.A.
CERTIFIED PUBLIC ACCOUNTANT
8902 NORTH DALE MABRY, SUITE 214
TAMPA, FLORIDA 33614

TEL. 932-4900

MEMBER
FLORIDA INSTITUTE
OF CERTIFIED PUBLIC ACCOUNTANTS

2

7/21/97

GENTLEMEN,

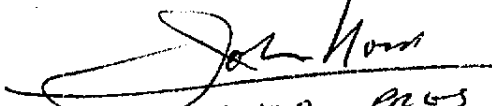
PLEASE ELIMINATE LATE FILING FEE OF \$385.00
FOR FOLLOWING REASONS:

- 1) THIS IS A FIRST ANNUAL REPORT -
INCORPORATION INCORPORATION 3/13/96
- 2) YOU DID NOT FURNISH COPY TO FILE
FIRST ANNUAL REPORT - I FILED FOR OTHER
CORPORATIONS ON APRIL 10, 1997 WHEN FILING
COPIES WERE FURNISHED TO ME (I CAN FURNISH
SWORN AFFIDAVIT TO THAT EFFECT)
- 3) THE FILING CORPORATION IS NON OPERING
AS YET CORPORATION
- 4) IF YOU CHOOSE NOT TO ACCEPT MY REQUEST
PLEASE RETURN MY CHECK FOR \$165.00 AND
I WILL GET ANOTHER CORPORATION TO \$70.00

I HOPE YOU WILL CONSIDER MY REQUEST.
AS THE OVER 233% PENALTY IN THIS SITUATION
SEEMS TO BE UNFAIR.

VERY TRULY YOURS

COM-VOST, INC


JOHN NORD, P.A.