


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

APPROVED
pg. 1 of 2

97 JUN 25 AM 8:47

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 # **P96000030923**
1. Corporation Name

FYI, Inc.

Principal Place of Business

Mailing Address

2. Principal Place of Business

21 **1058 LARKSPUR LOOP**

Suite, Apt. #, etc.

22

City & State

23 **JACKSONVILLE, FL**

Zip

24 **32259**

Country

25 **U.S.A.**

2a. Mailing Address

26 **1058 LARKSPUR LOOP**

Suite, Apt. #, etc.

27

City & State

28 **JACKSONVILLE, FL**

Zip

29 **32259**

Country

30 **U.S.A.**

3. Date Incorporated or Qualified

4/9/96

3a. Date of Last Report

N/A

4. FEIN Number

59-3373111

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

9. Name and Address of Current Registered Agent

AMERILAWYER CHARTERED
343 ALMERIA AVENUE
CORAL GABLES, FL 33134

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

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

TITLE NAME ☐ DELETE

STREET ADDRESS

CITY - ST - ZIP

TITLE NAME ☐ DELETE

STREET ADDRESS

CITY - ST - ZIP

TITLE NAME ☐ DELETE

STREET ADDRESS

CITY - ST - ZIP

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TITLE NAME ☐ DELETE

STREET ADDRESS

CITY - ST - ZIP

TITLE NAME ☐ DELETE

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

PRESIDENT

MARK L. SNYDER

1058 LARKSPUR LOOP

JACKSONVILLE, FL 32259

TREASURER

FU-YING D. SNYDER

1058 LARKSPUR LOOP

JACKSONVILLE, FL 32259

SECRETARY

MARK L. SNYDER

1058 LARKSPUR LOOP

JACKSONVILLE, FL 32259

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-07/01/97-01009-008

******165.00 ****165.00**

A. Alan

6/25/97

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:

Mark L. Snyder

MARK L. SNYDER

6/15/97

904 443-1638

CR2E034 (9/96)

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FYI, Inc.

1058 Larkspur Loop
Jacksonville, FL 32259

June 24, 1997

Annual Reports Filings
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

Dear Sir or Madam:

Since this is my first annual report, I did not really understand when the filing deadline occurred. I called last week trying to get some information. After a conversation with someone at your office, I was told that since I have moved and did not receive my form I had additional time before having to pay a penalty. For this reason, I have included a check for the original fee - \$165.

Thanks for your consideration.

Sincerely,



Mark L. Snyder
President, FYI, Inc.