

081999-90005-003-\$300.00-\$300.00

AMOUNT DUE ON OR BEFORE 09/15/99: \$350 (IF DISSOLVED, MINIMUM AMOUNT DUE TO RESTATE: \$700)

199.


APPROVED
AND
FILED

99 NOV -3 PM 2:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8-A-99 90005-003

DO NOT WRITE IN THIS SPACE

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # P96000048495 1. Corporation Name CAMCO SERVICES, INC.		

Principal Place of Business 4445 N. A1A SUTIE 150A VERO BEACH FL 32903	Mailing Address 4445 N. A1A SUTIE 150A VERO BEACH FL 32903
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2. Principal Place of Business 21 4445 N. A1A Suite, Apt. #, etc. 22 150A City & State 23 VERO BEACH, FL. Zip 24 32903	2a. Mailing Address 26 4445 N. A1A SUTIE 150A Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30 USA
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3. Date Incorporated or Qualified 06/06/1996	4. FEI Number 65-0672716	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes the current year Intangible Personal Property. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

9. Name and Address of Current Registered Agent PALESTRINI, PAUL 4445 N. A1A SUTIE 150A VERO BEACH FL 32903	
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10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 FL 86 Zip Code	
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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: *Paul Palestrini* DATE: *8-12-99*
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PALESTRINI, PAUL	1.2 NAME	
STREET ADDRESS	4445 N. A1A SUTIE 150A	1.3 STREET ADDRESS	
CITY-ST-ZIP	VERO BEACH FL 32903	1.4 CITY-ST-ZIP	
TITLE		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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: *Paul Palestrini* DATE: *8-12-99* DAYTIME PHONE: *561-234-9200*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CAMCO SERVICES, INC.
4445 N. A1A, SUITE #150
VERO BEACH, FL 32963
(561) 234-9300 FAX (561) 234-9333

Date: 11/02/99

To: Michelle Milligan

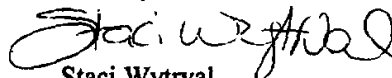
From: Staci

Re: Corporate Annual Report

Michelle,

In late July we received a 2nd notice for our Annual Report. I immediately called the Division of Corporations because we never received a 1st notice. I was then instructed by a representative named Frieda to cut a check for \$150.00 for each corporation and they would credit both Camco Services, Inc. as well as Camco Services, Inc. of the Treasure Coast and everything would be corrected. Instead, Camco Services, Inc. was credited \$300.00 and the Treasure Coast was ignored. I now received inactive status for both corporations. I would appreciate if this matter be taken care of as soon as possible and please waive any penalty fees. I also attached a copy of the annual reports for both corporations and entered the FEI # for the Camco Services, Inc. of the Treasure Coast. Upon the necessary corrections, I would greatly appreciate a letter stating the mistake and correction for my records. Thank you for your anticipated cooperation.

Thank you,



Staci Wytrval
Administrative Assistant
Camco Services, Inc.