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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P96000055803 (6)**

GOLLY'S SERVICES, INC.

Principal Place of Business 8118 S.W. 22ND COURT

Mailing Address

6116 S.W. 22ND COURT MIRAMAR FL 33023-2927

FILED Apr 16 1997 8:00am Secretary of State



MIRAMAR FL 33023		MIRAMAR FL 33023-2927							
					3. Date Incorporated or Qualified 06/28/1996		3a. Date of Last Report 1 St Report		
2. Principal Place of Busine		2a. Mailing Address			4. FEI Number		Applied For		
21 6/16 SW	22ct; mnama	26 616 SW Z	20 ; p	momo.	1 65-	16819	44		t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of	of Status Desired	\$8.75 Additional Fee Required			
City & State 23 MIRAMAR,	Les en			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
^{7φ} 24 <i>330</i> 23	Country USA.	Zip 29 33423	Country	50	8. This corpora	ation has liability for i utes	ntangible ta Yes 🔲		199.032,
	and Address of Current			,	10. Name and	Address of New Re	gistered Ag	ent	
GOLAUB, NORM			81	Name	מאו				
6116 S.W. 22ND COURT				82 Street Address (P.O. Box Number is Not Acceptable)					
MIRAMAR FL 33	023								
			83					,	
			84	" '			FL	85 Zip (
agent. Lam familiar will SIGNATURE PORMA	ent, or both, in the State o h, and accept the obligati	of Ftorida. Such change was ions of, Section 607.0505, F ************************************	s authorized by Florida Statule	the corporat	tion's board of dire	ctors. I hereby accep	of the appoin	ntment as	registered 7
12.	OFFICERS AND		Z 13.		ADDITIONS/	CHANGES TO OFFIC			
TITLE DP	MODULE A	☐ DELETE	1.1 TITLE				L	_ Change	
	NORMAN G		1.2 NAME						
STREET ADDRESS MIRAMAR	22ND COURT		1.3 STREET	•					
	PL 33023	[.] perete	1.4 CITY-5	T-ZIP				Change	Addition
COLAUD	IINA S	DELETE	2.1 TITLE				L-	1 Ollarige	Rounion
0110 CW	22ND COURT		2.2 NAME 2.3 STREET	ADDRESS					
CITY-ST-ZIP MIRAMAR			2.4 CITY-						
TILLE		DELETE	3.1 TITLE	31-211				Change	Addition
NAME			3.2 NAME						
STREET ADERESS			3.3 STREE	ADDRESS					
CHY-ST ZIF			3.4. CITY -	ST-ZIP					
TITLE		DELETE	4.1 TITLE				Ĺ	Change	Addition
NAME			4. 2 NAME						
STREET ADDRESS			4.3 STREE	ADDRESS					
City-S1-76		[] Deceme	4.4 CITY-1	ST - ZIP			г	Change	Addition
THLE		☐ DELETE	51 TITLE				L.	TI CHANÎR	L) MUURION
NAMI			52 NAME	r address					
STREET ADDRESS									
OTY-ST-70°		☐ DELETE	5.4 CiTY-1	21-til.			···	Change	Addition
NAME			62 NAME				-	•	
STREET ADDRESS				ADDRESS					
CITY-ST-ZIP			64 CITY -	•					
			100		1)- 0 440.00	(O)(i) Flavida Casada	- 1 4	a stife a the at	the.

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:

MSSOIQUED

4/10/97 (24)981-7894