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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000057659 (0)
1. Corporation Name

DURBIN SERVICES. INC.

FILED Mar 09 1998 8:00am Secretary of State

OUTION	or or into					I JERNIKAN KID IRKIN RIKIN REKIN BANK BANK BAKA BAK	JE LOBANA ORNALI	0 (1) 0 (3)) (8 0)
Principal Place	a of Business	Mailing Address						PART IN INCH
•		· .						
1443 ALBERN PALM BAY F	1443 ALBERNI ST. NW Palm Bay Fl 32907							
Triant Girl In door.						DO NOT WRITE IN THIS	SPACE	
						3. Date Incorporated or Qualified		
6 Dringing D	lace of Business	2a. Mailing Address				07/08/1996 4. FEI Number		antiad Far
	26. Maining Address	Address			59-3384744		Applied For Not Applicable	
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc								Additional
22	27				5. Certificate of Status Desired		Required	
City & State City & State						6. Election Campaign Financing	\$5.00	May Be
23 28						Trust Fund Contribution	Added	to Fees
			_	Country		8. This corporation owes or has paid the cur	_ ′ .	~ I
24 25 29 30 9. Name and Address of Current Registered Agent			30			Personal Property Tax due June 30. 10. Name and Address of New Registered Address of New Regist		∐ No
		nt Registered Agent		81	Name	10. Name and Address of New Registered	Agent	
	IRBIN, KELLY M				110			
1443 ALBERNI ST. NW				82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
PA	LM BAY FL 32907			83				
				84	City	FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508. Florida Statute	s. the at	OOVE	named corpo	oration submits this statement for the purpose of	changing	its registered
office or re	egistered agent, or both, in the State m (amiliar with, and accept the oblice)	e of Florida. Such change was a	uthorized	o bv	the corporation	on's board of directors. I hereby accept the app	ointment a	s registered
	in tentinar with, and accept the doing	jalions of, beclion our .0000, i for	rida otat	utos	•			
SIGNATURE	Signature, typed or printed name of registered ag	gent and title II applicable. (NO1E	Registered	1 Ager	nt signature require	ed when reinstating) DATE		
12.	OFFICERS AN	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	RS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		Ì		L Change	L.) Addition
NAME	DURBIN, FRANKLIN W		1.2 N					
STREET ADDRESS	1443 ALBERNI ST. NW		1.3 STI		ADORESS			
CITY-ST-ZIP	PALM BAY FL 32907		1.4 CITY		r-ZIP		Observe	T Addition
TITLE	D	☐ DELETE	2.1 TITLE				Change	Addition
NAME	DURBIN, KELLY M			2.2 NAMÉ				
STREET ADDRESS	1443 ALBERNI ST. NW		2.3 STREET ADDRESS					
CITY-ST-ZIP	PALM BAY FL 32907	DELETE	2. 4 CITY 3.1 TITLE		T-ZIP		Change	Addition
TITLE			3.1 THEE 3.2 NAME				orange	roution
NAME OTDEET ANOBECC			3.3 STREE		ADDRESS			
STREET ADDRESS			3.4. CITY-					
CITY-ST-ZIP TITLE		DELETE	4.1 TITLE) - FIL		Change	Addition
NAME			4. 2 NAME					Ì
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP			4.4 CiTY-		i-ZiP			
TITLE		☐ DELETE	5.1 TITLE				Change	☐ Addition
NAME			5.2 NAME					
STREET ADDRESS			5 3 STREE		ADDRESS			
CITY-ST-ZIP			5.4 CITY-		- ZIP			
TITLE		☐ DELETE	6.1 TITLE				☐ Change	☐ Addition
NAME			62 NA	ME				
STREET ADDRESS			6.3 ST	AEET /	address			
City-St-ZIP 640 14. I hereby certify that the information supplied with this filing does not qualify for the ex			6.4 C()	Y-ST	- ZIP	Continue 140 07/00/10 Florida Continue 15 11	عد معلورة إلى	o information
14. I hereby c	ertity that the information supplied v	with this filing does not qualify for	r the exe	mpti	ion stated in S	Section 119.07(3)(i), Florida Statutes. I further ce	ring that the	nonsimum

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:

Koo. m Nukini

KELLY M. TURRIN 03/02/98

(401) 3 723-0480 :R2E034 (10/97