

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

FILED  
May 14 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000062894 (6)

1. Corporation Name:

ACS-ASSOCIATED CONTRACTUAL SERVICES, INC.



Principal Place of Business

7738 FRONTIER DRIVE  
YALAHUA FL 34797

Mailing Address

7738 FRONTIER DRIVE  
YALAHUA FL 34797

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/29/1996	
21	36424 Florie Mae Lane	26		4. FEI Number 59-3394424	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
22		27	P.O. Box 391	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State		City & State		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
23	Dade City, FL	28	San Antonio, Florida		
Zip	Country	Zip	Country		
24	33523-6541	29	33576	30	USA

9. Name and Address of Current Registered Agent

SCRIBNER, JOHN R  
7738 FRONTIER DRIVE  
YALAHUA FL 34797

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

Rafael A. Robles, Esq.  
2150 Mariner Blvd.  
Spring Hill FL 34608

11. Pursuant to the provisions of Sections 607.0509 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 of Registered Agent or Director, if applicable

RAFAEL A. ROBLES

(NOTE: Registered Agent signature required when reinstating)

DATE

4/29/98

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	DELETED		1.1 TITLE	P/T/D	Change	Addition
NAME	ARROYO, DANIEL			1.2 NAME	Bartolome Colom		
STREET ADDRESS	7738 FRONTIER DRIVE			1.3 STREET ADDRESS	36424 Florie Mae Lane		
CITY-ST-ZIP	YALAHUA FL 34797			1.4 CITY-ST-ZIP	Dade City, FL 33523-6541		
TITLE	D	DELETED		2.1 TITLE	V/D	Change	Addition
NAME	SCRIBNER, JOHN R			2.2 NAME	Robert F. Grimsley		
STREET ADDRESS	7738 FRONTIER DRIVE			2.3 STREET ADDRESS	13123- 108th Ave. North		
CITY-ST-ZIP	YALAHUA FL 34797			2.4 CITY-ST-ZIP	Largo, FL 33774		
TITLE	D	DELETED		3.1 TITLE	S/D	Change	Addition
NAME	COLOM, BARTOLOME			3.2 NAME	Rafael A. Robles, Esq.		
STREET ADDRESS	7738 FRONTIER DRIVE			3.3 STREET ADDRESS	11387 Long Hill Ct.		
CITY-ST-ZIP	YALAHUA FL 34797			3.4 CITY-ST-ZIP	Spring Hill, FL 34609		
TITLE		DELETED		4.1 TITLE		Change	Addition
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		DELETED		5.1 TITLE		Change	Addition
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		DELETED		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 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:

RAFAEL A. ROBLES

4/29/98

(352) 688-8070

CP2E034 (10/97)