## 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 # P96000072898 (5)

AT YOUR SERVICE OF PALM BEACH COUNTY, INC.

Principal Place of Business Mailing Address										10     30    160	10 HOUR 10HU	F0101 F011 1001
11148 HEARTWOOD PL WELLINGTON FL 33414			11148 HEARTWOOD PL WELLINGTON FL 33414						DO NOT WRIT	E IN THIS	SPACE	
								3.	Date Incorporated or Qualified			
									09/01/1996			
2. Principal Pl	ac <b>e</b> of Business	28.	Mailing Address					4.	FEI Number			Applied For
21			26					<u> </u>	65-0702128			Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5.	Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State			City & State				1	Election Campaign Financing			O May Be	
Zip Country									Trust Fund Contribution			d to Fees
24	25	29	լ իդ			31107			This corporation owes or has p Personal Property Tax due Jur			Intangible No
[24]	g. Name and Address of Curr		tered Agent	1301	T			·	Name and Address of New F			
SAI	OPEK, ALBERT T	<u>-</u> -			81	Na	me					
	48 HEARTWOOD PL					Cir	not Addroi	00 (D	O. Boy Number is Not Assent	ablo)		
	LUNGTON FL 33414					Street Address (P.O. Box Number is Not Acceptable)						
					83							
					84	Cit					<b>85</b> Zi	ip Code
					1 1	İ	•			FL	•     '	•
office or re	o the provisions of Sections 607.09 egistered agent, or both, in the Sta n familiar with, and accept the obl	te of Etoric	da. Such change was	authorizo	od by	y the	ned corpo corporatio	ration on's b	n submits this statement for the pard of directors. I heroby acc	purpose o ept the app	f changing ointment a	j its registered as registered
SIGNATURE .	Signature, typed or prieted name of registered a	god and bre	if applicable (NC	)? E Register	ed Age	ent eign	nature required	l when i	reinstating)	DATE		
12.	OFFICERS A			13.					ADDITIONS/CHANGES TO OFF	ICERS AND	DIRECTO	ORS IN 12
TITLE	D		DELETE	1.1 1	ITLE				and the second s		Change	e 🔲 Addition
NAME	SALOPEK, ALBERT T			1.2 (	<b>AME</b>							
STREET ADDRESS	11148 HEARTWOOD PL			1.3 5	STREET	ADDR	ess					
CITY-S1-ZIP	WELLINGTON FL 33414			1.4 0	пу-ѕ	61-7IP						
TITLE			☐ DELETE	211	ITLE						☐ Change	e 🔲 Addition
NAME				2.2 8	IAME							
STREET ADDRESS				2.3 5	TREET	ADDRI	ESS					
CITY-ST-ZIP				2.4	CITY-S	S1 - ZIP						
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NAME				3.2 N	IAME							
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CITY-ST-ZIP			Deceme			\$1-7IP					TT Change	T Addition
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NAME				- 1	NAME	1000						
STREET ADDRESS						ADDRI	199					
CITY-ST-ZIF <sup>*</sup>			DELETE	5.1 )	HTY - S	1 - ZIP					☐ Change	e Addition
NAME			E Decerte	5.2 M								
STREET ADDRESS						ADDRI	:00					
CITY-SI-ZIP					:::,::::: ::::Y-S							
TITLE			DOLETE	6.1 T							Change	e Addition
NAME				6.2 N								
STREET ADDRESS	4					ADDRI	rss					
CITY-ST-ZIP				l i	:ITY-S							
14 Lhereby c	ertify that the information supplied	with this f	ling dods not qualify	for the ex	emn	lion s	stated in S	ection	n 119.07(3)(i), Florida Statutos.	further ce	ortify that ti	he information
officer or o	on this armual report or supplement director of the corporation or the re or Block 13 if changed, or on an are	ogiver or	I report is true and ac trustce/empowered to whiter address.	curate ar execute	this r	at my repoi	rt as requir	e shall red by	i nave the same legal effect as y Chapter 607, Florida Statutes	if made un ; and that r	ider oath; f Yiy name a	inat I am an appears in

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**FILED** 

Jan 20 1998 8:00am

Secretary of State