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CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1, Corporation Name P96000083644 (0)

PUBLIC SERVICES BUREAU, INC.

Mailing Address

FILED Jan 26 1998 8:00am Secretary of State



Principal Place of Business 400 S. FEDERAL HIGHWAY, SUITE 410 400 S. FEDERAL HIGHWAY. SUITE 410 **BOYNTON BEACH FL 33435 BOYNTON BEACH FL 33435** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/07/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0702399 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zip Country Zφ Country 8. This corporation owes or has paid the current year Intangible 24 25 X Yes 29 30 Personal Property Tax due June 30. ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BENEBY, CHARLES 400 S. FEDERAL HIGHWAY, SUITE 410 82 Street Address (P.O. Box Number is Not Acceptable) **BOYNTON BEACH FL 33435** 83 84 85 Zip Code 11. Pursuant to the provisions of Sections 607.05:02 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, typod or printed name of registered agent and title if applicable (NOT). Flegistered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 T/T) F DELETE 1.1 TITLE Change Addition NAME BENEBY, CHARLES 1.2 NAME 400 S. FEDERAL HWY., STE. 410 STREET ADDRESS 13 STREET ADDRESS **BOYNTON BEACH FL** CITY-ST-ZIP 14 CITY - ST - ZIP DELETE TITLE 21 TITLE Change ■ Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY - ST - ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-2IP DETETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREE1 ADDRESS CITY-ST-ZIP 4.4 CITY - ST-ZIP DELETE 5.1 TITLE Change Addition NAME **5.2 NAME** STREET ADDRESS **53 STREET ADDRESS** CITY-ST-ZIP 54 CITY-ST-ZIP 000002411210 Change TITLE DELETE 61 TITLE Addition NAME 6 2 NAME -01/26/98--01018--018 STREET ADDRESS 6.3 STREET ADDRESS ***150.00 6.4 CITY - \$1 - 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 informatic 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 to on an attachment with an address.