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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

FILED Apr 16 1997 8:00am Secretary of State

	1991	DIVISION OF CO.	II OHATIONO	,00000		
11 Oorporand	MENT # P9600 RVICE, INC.	00096146 (1)				• • • • • • • • • • • • • • • • • • • •
Principal Plac	ce of Business	Mailing Address		I IEORKODA IIO ADAID OMAIN ODINA BORIN O	EIRL BOHD IONO DIVON HON ENGIN	}
2117 N DIXIE HWY LAKE WORTH FL 3460		2117 N DIXIE HWY LAKE WORTH FL 33460-6258				
				3. Date Incorporated or Qualifier 11/25/1996	d 3a. Date of Last F	?eporl
	Place of Business	2a. Mailing Address		4. FEI Number 65-070 888		pplied For
21 Suito Ant	# oto	Suite And # ote		65-070888		ot Applicable
Suite, Apt. 22 City & Star		Suite, Apt. #, ctc. 27 City & State	· -·····	5. Certificate of Status Desired	Fee R	Additional equired
23	ic	28		6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip	Country	Zip	Country	8. This corporation has liability for		
24	25	29 30	1	Florida Statutes	Yes No	
	g. Name and Address of Cu	rrent Registered Agent		10. Name and Address of New	Registered Agent	
	t, robert e		81 Name			
2117 N DIXIE HWY			82 Street Ad	ct Address (P.O. Box Number is Not Acceptable)		
LAKE	E WORTH FL 3460					
			83			
			84 City		85 Zip	Code
44 Durawant	to the provisions of Costiany COV	or on the contactor throat one in			FL "	
office or	registered agent, or both, in the S	itate of Florida. Such change was auth	orized by the corpor	rporation submits this statement for the ation's board of directors. I hereby acc	a purpose of changing i cept the appointment as	is registered registered
ag ent. I a	am familiar with, and accept the of	bligations of, Section 607.0505, Horid	a Statutes.			
SIGNATURE	Signature, typed or printed name of registers.	Tament and trice il sonote seste (NCCL) for	gistered Agent's grature req	a tite of whom rejustation?	DATE	
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OF		RS IN 12
TITLE	D	☐ DELETE		D	Change	Addition
NAME	MLOT, ROBERT E		1.2 NAME	MLOT, CATHERI	NE	
STREET ADDRESS	2117 N DIXIE HWY		1.3 STREET ADDRESS	2117 N. DIXIE LAKE WORTH, A	Huy	
CITY+ST-ZIP	LAKE WORTH FL 3460		1.4 CITY - ST - ZIP	LAKE WORTH, A	TC 33460	
TITLE		∐ DELETE	2.1 TITLE	•	L Change	Addition
NAME	•		2 2 NAM1			
STREET ADDRESS			2.3 STREET ADDRESS		4	
CITY-ST-ZIP		· [7] bij die	2 4 C(1Y+S1+ZIP		□ Observe	(Galance -
TITLE		☐ DELETE	317006		L Change	Addition
STREET ADDRESS			3.2 NAME 3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CHY-S1-7IP			
TIFLE		DELETE	4.1 TITLE		Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 Ci1Y - S1 - ZIP	•		
TITLE		DELETE	5 1 TITLE		Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-7/P			
TITLE		☐ DELETE	6111111		☐ Change	Ad ø ₁tion
NAME			62 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 Crty - St - Zrp			

14. I do hereby certify that the information supplied with this filting does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statules. 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 eath; 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 own attachment with an address.