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**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 17, 1999 8:00am

**Secretary of State** 

02-17-1999 90060 005 \*\*\*158.75

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P96000098526**1. Corporation Name

COMMERCIAL INVESTMENT FINANCIAL SERVICES, INC.

	Principal Place of Business	Mailing Address							•		
1	700 South dixie highway uite 38	1700 South dixie Highway Suite 3B									
BOCA RATON FL 33432		BOCA RATON FL 33432				DO NOT WRITE IN THIS SPACE					
							3. [	Date Incorporated or Qualifed	•• • •		
		.,					<u> </u>	12/05/1996		~	
	2. Principal Place of Business	2a. M	ailing Address				1	FEI Number		- A	plied For
21		26					{	<u>65-0771869</u>			ot Applicable
	Suite, Apt. #, etc.	<u> </u>	iite, Apt. #, etc.				5. 0	Certifcate of Status Desired			Additional
22	City & State	27 Ci	ity & State								equired
23	<b>1</b>	28	iy a ciale				į.	Election Campaign Financing Trust Fund Contribution		\$5.00 Added	
23	Zip Country	Zir	<u> </u>	Count	ity .	-	<del> </del>	This corporation owes the curr	ent veer l		io rees
24	, <u>~</u>	29	[:	30	•			Personal Property Tax.	ent year n	Yes	□No
	9. Name and Address of Curre	nt Register						Name and Address of New F	Registere	d Agent	
	WOOLEY THOUSAND	e		8	1 Nam	ne				_	
	WOOLLEY, THOMAS J JR	•.		ā	2 Stre	et Addres	ee /P (	O. Box Number is Not Accepta	hle)		
	639 EAST OCEAN AVENUE					ot Addic.	۰. ۱٫ دد	O. Dox Humber is Not Accept			
	SUITE 408 BOYNTON BEACH FL 33435			8	3					1. 图 32 图	類無質
	DOTINION DEACH FL 33433			8	4 City				1.0 86 (1.2%)	85 Zip	Code * ******
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11	<ol> <li>Pursuant to the provisions of Sections 607.05 office or registered agent, or both, in the State</li> </ol>	02 and 607.1	1508, Florida Statute: Such change was aut	s, the about	ve-name	ed corpor	ration s	submits this statement for the	purpose o	of changing its	registered
	agent. I am familiar with, and accept the oblig	ations of, Se	ction 607.0505, Flori	ida Statute	es.	., po, a	0 000	ina or anocioro. I moroby docop	n uno app		gistered
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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, with all other like empowered. SIGNATURE: