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

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE

FILED

Mar 13 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1.			# P970 ILTISERVICE CO		99 (2))					ill
Principal Place of Business Mailing Address									-{	8461 14816 18146 1811 (1	Ш
9043 SOUTHWEST 112 COURT 9043 SOUTHWEST 112 CO						COURT					
MIAMI FL 33176 MIAMI FL 33176						COUNT					
									DO NOT WRITE IN THIS SP.	4CE	
									3. Date Incorporated or Qualified		
2. Principal Place of Business				2a. Mailir	2a. Mailing Address				01/31/1997 4. FEI Number	Applied F	· ~ ·
21	21				[26]				59-3424593	Not Applie	
	Suite, Apt. #, etc.				Suite, Apt. #, etc.					\$8.75 Addition	
22			27					5. Certificate of Status Desired	Fee Required		
	City & State			·	City & State				6. Election Campaign Financing	\$5.00 May Be	е
23	Zip	<u> </u>	Country	28 Zip		1 6-			Trust Fund Contribution	Added to Fees	
24	r.ib		25	29		30	intry		8. This corporation owes or has paid the currer	nt year Intangible Yes 🔲 No	•
18-71		9. Name	and Address of Cur		Agent	[30]		•	Personal Property Tax due June 30. 10. Name and Address of New Registered Ag		
	CO	DRPORATIO	ON SERVICE COMP	ANY			81 Nam	e 2	11 0		
	1201 HAYS STREET						82 Street	Addre	ATH M. KOOS		
TALLAHASSEE FL 32301-2525							7	04	ess (P.O. Box Number is Not Acceptable)		
							83				
							84 City		.	85 Zin Code	
							1	MI	'Mm FL	08/7	6
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of change 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 appointme agent. I and familial with, and accept the obligations of, Section 607.0505, Florida Statutes.											bere
	agent. I a	.\	/	ligations of, Section	on 607.0505, FI	orida Stat	utes.				00
SIC	SNATURE A		or printed name of registered	agout and tills if nonline	No. (10)	rr. B. Jan	4 *		03-10-	98	
12		dignatore, typeo		ND DIRECTORS	0·a. (NO)	13.	Agent signati	re required	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND D	PECTORS IN 12	,
TITE	.E	DP			DELETE	1.1 TI	LE	Τ_			dition
NAA	AE .	ROOS,	RUTH M			1.2 NA	ME		···	• –	
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67DE								4			i

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 formula 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 exemption or true 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.

NATURE:

CITY-ST-ZIP