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

	IMENT # P97000 FINANCIAL SERVICES, INC.)	
Principal Plac	ce of Business	Mailing Address		- ADDERDAR AND NDAR NOBEL BOTH DOWN BOTH HOUSE ATOM TOTAL BRAIN CITY OF THE
1851 MAYTOV		1851 MAYTOWN ROAD		
OAK HILL FL		OAK HILL FL 32759		
				DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
Principal F	Place of Business	2a. Mailing Address		03/27/1997 4. FEI Number Applied For
21	The Contract of the Contract o	26		59-3435600 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		\$8.75 Additional
22		27		5. Certificate of Status Desired Fee Required
City & Stat	le	City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	25 2 Name and Address of Curren	29	30	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
AU	IERILAWYER CHARTERED	I HORIOTON MRAIN	81 Nai	
	S ALMERIA AVENUE			
	ORAL GABLES FL 33134		82 Stre	eet Address (P.O. Box Number is Not Acceptable)
	THE CHOICE IE SOUTH		83	
			94 66	loc 75 Code
			84 City	FL 85 Zip Code
11. Pursuant office or ragent. I a	to the provisions of Sections 607.050; registered agent, or both, in the State am familiar with, and accept the obliga	2 and 607.1508, Florida State of Florida. Such change was ations of, Section 607.0505, I	utes, the above-names authorized by the effortide Statutes.	ned corporation submits this statement for the purpose of changing its registered corporation's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature typed or printed name of registered ager	of and title if emplicable (N	OTF- Registered Agent sign	ature required when reinstating) DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PSTD	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	GRASSO, EVE		1.2 NAME	
STREET ADDRESS	1851 MAYTOWN ROAD		1.3 STREET ADDRE	ss
CITY-ST-ZIP	OAK HILL FL 32759		1.4 CiTY - ST - ZIP	
TITLE	VICE PRESIDENT	☐ DELETE	2.1 TITLE	Change Addition
NAME	GRASSO VINCEN 1851 MAYTOWN A	Γ.ζ.,	2.2 NAME	
STREET ADDRESS	OAK HILL, Fr 327	-0170 > -−0	2.3 STREET ADDRE	SS
CITY-ST-ZIP	OFFICE ITE SO		2. 4 CITY - ST - ZIP	
TITLE		∐ DELE te	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRE	SS
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	Change Addition
NAME			4.2 NAME	C Onlings C Received
STREET ADDRESS			4.3 STREET ADDRES	ce l
CITY-ST-ZIP			4.4 CITY - ST - ZIP	
TITLE		DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRES	SS
CITY-ST-ZIP			5.4 City - St - ZIP	
TITLE		☐ DELET E	6.1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRES	ss

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.

6.4 CITY - ST - ZIP

10010TUDE 510 P

FUE GORE

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FILED

Mar 03 1998 8:00am

Secretary of State