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

PROFIT CORPORATION ANNUAL REPORT



Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1998 DOCUMENT # 1. Corporation Name P97000034951 (8)

COMPATIBLE SERVICES, INC.

FILED Apr 13 1998 8:00am Secretary of State



Principal Place of Business		Mailing Address		s saastads sie saint saatt Batti Batti datel desab tilli Biele jõidi dijäl tibi jõli	
298 MYRTLEWOOD RD 298 MYRTLEWOOD RD			D		
MELBOURNE FL 32940 MELBOURNE			0	DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	HIS SPACE
				1	
2. Principal Plac	e of Business	2a, Mailing Address		04/17/1997 4. FEI Number	Applied For
	MAGNOLIA AVE	26 1824 54	ndra Blud	593441752	Not Applicable
Suite, Apt. #,	etc.	Suite, Apt. #, etc.			\$8.75 Additional
22 Sutte		27		5. Certificate of Status Desired	Fee Required
City & State		City & State	ed .	6. Election Campaign Financing	\$5.00 May Be
23 Mepai		28 SEVEING	A.	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	current year Intangible
24 32957		29 33870	30 High CHIVES	Personal Property Tax due June 30.	Yes No
	g. Name and Address of Curre	ent Registered Agent		10. Name and Address of New Registe	red Agent
KOZIC, JOSEPH 81 Name					
298 MYRTLEWOOD RD 82 S				ress (P.O. Box Number is Not Acceptable)	
MELBOURNE FL 32940				24 SANDRA BIVE	
			83		
			84 City <		es Zin Codo
				=bring	FL 85 Zip Code フロー
11. Pursuant to	the provisions of Sections 607.05	02 and 607.1508, Florida Sta	tutes, the above-named cor	moration submits this statement for the nurnor	ea of changing its registered
agent. I am f	istered agent, or both, in the Stat familiar with, and accept the obli	e of Florida. Such change was gations of, Section 607.0505.	is authorized by the corpora €lorida Statutes	ation's board of directors. I hereby accept the	appointment as registered
SIGNATURE 3			mark w	Cozne 4	Hulas
Sig	nature, typed of printed name of registered a		NoTE Registered Agent signature requ	lired when reinstating) DA	(E) 123
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	D	☐ D€LETE	1.5 TOTLE	PESIDENT	Change Addition
NAME	KOZIC, JOSEPH		1.2 NAME	Kosic, Zoseph	
STREET ADDRESS	298 MYRTLEWOOD RD		1.3 STREET ADDRESS	1929 SHNOWN BUY	
CITY-ST-ZIP	MELBOURNE FL 32940		1.4 CITY-ST-ZIP	SEBRING PI 3387	,0
TITLE		☐ DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS	,	
CITY-ST-ZIP			2. 4 CITY - ST - ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADORESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	51 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5 4 CITY-ST-ZIP		
TITLE	=	DELETE	6.1 TITLE		Change Addition
NAME		_	6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP					
	if that the information countied	at at the second	6.4 CITY - ST - ZIP		

I nereby 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 supplierrental 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.

SIGNATURE:

Joseph KOZX

416/98