PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000076224

1. Corporation Name XS, INC.

Principal Place of Business

Mailing Address

FILED Apr 19, 1999 8:00 am Secretary of State

04-19-1999 90102 015 ***150.00



Suite, Apt. City & State	DULEVARD CHANGE OF ADDRESS CH FL 32124 ADDRESS BOX 95 63 #, etc.	DAYTONA BEACH FL 32124 2a. Mailing Address P.O. BOX. 9 Shite. Aot. #, etc. 27 City & State DAYTONA Zip	5,63 BEAC	Ή, F		ble
24.32/0	$20 \cdot 25 \cdot USA$	29 32120 3)	5	Personal Property Tax. ☐ Yes ☑No	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent	
		_	81	Name		
BOLERJACK, DAN				Street Ad	dress (P.O. Box Number is Not Acceptable)	
C/O BOLERJACK, KEYES AND ASSOCIATES P.A.						
42 SOUTH PENINSULA DRIVE DAYTONA BEACH FL 32118			83			1
DATI	IUNA DEACH FE 32116		84	City	85 Zip Code	
		4000 Ft 1 - Cr 1	455		FL Secretion submits this etatement for the purpose of changing its registered	,d
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 changing its registered 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 appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE						
JIGHA TORLE	Stgnature, typed or printed name of registered agent	and true if applicable. (NOTE: R	egistered Age	nt signature requ	ired when reinstating) DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	_
TITLE	VP	☐ DELETE	1.1 TTTLE		☐ Change ☐ Add	illion
NAME	FINK, HOWARD E JR		1.2 NAME			Į
STREET ADDRESS	1790 ROSCOE TURNER TRAIL			TADDRESS]
CITY-ST-ZIP	DAYTONA BEACH FL 32124	O OFFICE	1.4 CITY-S	T-ZIP	☐ Change ☐ Addi	lition
TITLE	VP	☐ DELETE	2.1 TITLE			10011
NAME	FINK, ROBERTA W		2.2 NAME		, , . 	- -
STREET ADDRESS	1790 ROSCOE TURNER TRAIL	•		TADDRESS		
CITY-ST-ZIP	DAYTONA BEACH FL 32124	☐ DELETE	2.4 CITY-5 3.1 TITLE	31-CH	☐ Change ☐ Add	ition
TITLE NAME		<u> </u>	3.2 NAME		_ , _	
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			3.4. CITY-5			
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Add	dition
NAME			4. 2 NAME			ļ
STREET ADDRESS.			4.3 STREE	T ADDRESS		
CITY-ST-ZIP			4.4 CITY-S	- 1		
TITLE		☐ DELETE	5.1 TITLE		Change Add	dition
NAME			5.2 NAME			
STREET ADORESS			5.3 STREE	TADORESS	•	
CITY-ST-ZIP			5.4 CITY-8	ST-ZIP		-
TILE		☐ DELETE	6.1 TITLE	-	☐ Change ☐ Add	dition
NAME -:			6.2 NAME			}
STREET ADDRESS			6.3 STREE	TADORESS		ļ
CITY-ST-ZIP			6.4 CITY- 5	ST-ZIP]

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: