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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra b. Mortham

**FILED** 

Jun 04 1998 8:00am

Secretary of State

Secretary of State

DIVISION OF CORPORATIONS

**1998**DOCUMENT #

P97000093924 (3)

TEMPL	LE SERVICES, INC.	•	,			8 1200 1444 1444 1644 8144 4411
Principal Plac	e of Business	Mailing Address		<del></del>		0 <del>18</del> (06 11110 18110 11811 9181 1481
10966 INDIES DRIVE SOUTH 10966 INDIES DRIVE SOUTH JACKSONVILLE FL 32246 JACKSONVILLE FL 32246					DO NOT WRITE IN TH	IIS SPACE
					3. Date Incorporated or Qualified 10/31/1997	
9 Principal F	Place of Business	2a, Mailing Address			4. FEI Number	Applied For
21	iace of Cosmoss	26		59-3475470	Not Applicable	
Suite, Apt.	#. etc.	Suito, Apt. #, etc.				\$8.75 Additional
22	., 5.5.	27		5. Certificate of Status Desired	Fee Required	
City & Stat	0	City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	7ip	Countr	y	8. This corporation owes or has paid the	current year Intangible
24	25	29	30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Register	ed Agent
TE	EMPLE, JONATHAN D		61	Name		
10	966 INDIES DRIVE SOUTH		82	Street Add	Iress (P.O. Box Number is Not Acceptable)	
JA	ACKSONVILLE FL 32246		"	O NOCK / NOCK	and the contract of the theophasicy	
			83			
ı			84	City		85 Zip Code
			04	City	F	Zip Code
l office or r	registered agent, or both, in the State c im familiar with, and accept the obligat	of Florida, Such change was ions of, Section 607 0505, F	authorized b kirida Statute	y the corpora s.	poration submits this statement for the purpos tion's board of directors. I hereby accept the a	appointment as registered
12.	Signature, typed or printed name of registered agent OFFICERS AND		13.	eni signature requ	ADDITIONS/CHANGES TO OFFICERS /	
TITLE	0	DELETE	1.1 TITLE	··	ADDITIONS OF A CONTROL OF A CON	Change Addition
NAME	PELINIE JOHN THE P		1.2 NAME			C Suprige C Victoria
	STREET ADDRESS 10968 INDIES DRIVE SOUTH		· · ·			
CITY-ST-ZIP JACKSONVILLE FL 32246			1,3 STREET ADDRESS 1,4 CITY - ST- ZIP			
TITLE			2.1 TITLE	51-2IF		Change Addition
NAME	41 00 DH 141 FO 0		2.1 MLC			
STREET ADDRESS	ARRAG MINITO PRINT AND ITH		1			
MOVOODBELLE EL ANGAO			2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP			
CITY-ST-ZIP	D	DELETE	3.1 TITLE	31-411		☐ Change ☐ Addition
NAME	CALL OF ALLEY O		3.2 NAME	1		
STREET ADDRESS	ARRAG MINITA PARIT AGUALI			T ADDRESS		
CITY-ST-ZIP	14 OVO OND BLACE CALLOON		3.4. CITY-			
TITLE		DELETE	4.1 TITLE	····		Change Addition
NAME			4. 2 NAME			
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			4.5 STREE			
TITLE			6.1 TITLE	27 411		Change Addition
NAME	· · · · · · · · · · · · · · · · · · ·		5.2 NAME			
STREET ADDRESS				T ADDRESS		
CITY - ST - ZIP			5.4 CITY- 5	1		
TITLE		DELETE	6.1 HILE	31 - EIF		Change Addition
NAME		Part of the color	6.2 NAME	Ì		
STREET ADDRESS				T ADDRESS		
OUTV OF THE			0.5 STREE	1 ADDRESS		

14. Thereby 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 attackment with an address.