**FILE NOW: FILING FEE AFTER MAY 1 IS $225.00**

CORPORATION
ANNUAL REPORT
**1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 AM 10:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S23796** **(3)**

1. Corporate Name
**CERTIFIED REPORTING SERVICE, INC.**

Principal Place of Business
110 SE SIXTH STREET
FT. LAUDERDALE FL 33301-5000

Mailing Address
110 SE SIXTH STREET
FT. LAUDERDALE FL 33301-5000

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/08/1991
3a. Date of Last Report: 04/15/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite Apt # or — 22
Suite Apt # or — 27
City & State — 23
City & State — 28
24 25 29 30

4. FEI Number: 65-0250643
Applied For / Not Applicable

5. Certificate of Status Desired [ ] **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [ ] **$5.00** May Be Added to Fees

8. The corporation has elected to be governed by the provisions of Florida Statutes [X] Yes [ ] No

9. Name and Address of Current Registered Agent
**ELLIS, SHELA KAY**
**110 SE 6TH STREET**
**FT. LAUDERDALE FL 33301**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to Section 607.0505 of the 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 duties and responsibilities of registered agent under Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS
D
ELLIS, SHELA KAY
110 SE 6TH STREET
FT. LAUDERDALE FL

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS
Title / Name / Address / City, State, Zip — [ ] Change [ ] Add

14. I hereby certify that the undersigned, a duly elected officer of the corporation named above, is familiar with the contents of this annual report and to the best of my knowledge and belief, the information contained herein is true and accurate. I further certify that the corporation has complied with all provisions of Florida Statutes applicable to the filing of this report. I understand that the signature of a director or officer of the corporation is required to complete the report as required by Chapter 607, Florida Statutes, and that my name appears above, or on an attached amendment, or on a separately attached statement, with my address.

**SIGNATURE:** Shela K. Ellis
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/95 305-763-1382
Date Telephone

0200050 CP