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

PROFIT CORPORATION ANNUAL REPORT

1997



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

POCUMENT # \$46660

(4)

PSC, INC.

FILED Apr 28 1997 8:00am Secretary of State



Principal Place	e of Business	Mailing Address								
1640 SANDPIPE MERRITT ISLAN		1640 SANDPIPER STREET MERRITT ISLAND FL 32952-5576								
						3. Date Incorporated or Qualified 04/18/1991	3a. Date o		Report	
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number		A	pplied For	
21		26				59-3127198		_ N⁄	ot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	<u> </u>	\$8.75 Additional Fee Required		
City & State	9	City & S	tate			6. Election Campaign Financing		\$5.00	May Be	
23		28				Trust Fund Contribution			to Fees	
Zip	Country	Zip		Count	ry	8. This corporation has trability for in			. 199.032,	
24	25 25 Name and Address of Curre	29		[30]	J	Florida Statutes 10. Name and Address of New Rec	Yes N			
1825	IMAN, HARRELL, GRAHAM, MIT 5 8 RIVERVIEW DRIVE BOURNE FL 32901	CHELL & WATTW		8:	3	dress (P.O. Box Number is Not Acceptab	FL 8	5 Zip	Code	
office or re agent. I as SIGNATURE	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig Stgnature, typed or profiled name of registered age	e of Florida. Such a gations of, Section	change was a 607.0505, Flo	authorized to orida Statuk	oy the corpora es.	rporation submits this statement for the pation's board of directors. I hereby accep	urpose of cha it the appoint	inging i	ts registered registered	
12.		ID DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIS	RECTO	RS IN 12	
TITLE	PTS		DELETE	1.1 TOTLE				Change	Addition	
NAME	MADOFF, HERBERT S.			1.2 NAM6						
STREET ADDRESS	1640 SANDPIPER STREET			1.3 STRE	ET ADDRESS					
CITY-ST-ZIP	MERRITT ISLAND FL		T DULLIE	1.4 Cily				Channa	A statistics	
TITLE		Ł	DULETE	2.1 TITLE	1		LJ	Change	Addition	
NAME				2.2 NAM(
STREET ADDRESS CITY-ST-ZIP				2.4 CHY	ET ADDRESS					
TITLE	· · · · · · · · · · · · · · · · · · ·		DELETE	3.4 GHY				Change	Addition	
NAME		_		3 2 NAMI			_	-	_	
STREET ADDRESS				3 3 S1RE	ET ADDRESS					
CITY-ST-ZIP				3.4. CITY	- ST - ZIP					
TITLE		I	DELFTE	4.1 THE				Change	Addition	
NAME				4. 2 NAM	E					
STREET ADDRESS				4.3 STRE	E1 ADDRESS					
CITY-ST-ZIP				4.4 City						
TITLE	1	L	DELETE	5.1 TITLE	1		Ц	Change	☐ Addition	
NAME				5.2 NAMI	I					
STREET ADDRESS					F1 ADDRESS					
CITY-ST-ZIP			l pro res	5.4 CITY				04-	A 1.00	
TITLE		L	DELETE	6 1 1HLE			L	Change	Addition	
NAME	A_{ij}			6.2 NAME	l					
STREET ADDRESS					ET ADDRESS					
CITY-ST-ZIP				6.4 CITY	- S1 - 7IP				· · · · · · · · · · · · · · · · · · ·	

I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(i). Florida Statules, 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 13 if changed, or on an attachment with an address.