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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

S46660

(4)

PSC, INC.

Mailing Address

FILED Mar 27 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address				1 (BRICASA COL BURDA BLOCA BOSTA BROCA BROCA BORD BORD BORD BORD BERN 1841 1841
1840 SANDPIPER STREET		1640 SANDPIPER STREET				
MERRITT ISLAND FL 32952		MERRITT ISLAND FL 32952				DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
					1	04/18/1991
2. Principal P	2a. Mailing Address	ng Address			4. FEI Number Applied For	
21		<u> </u>	26			59-3127198 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				SS 75 Additional
22		27				5. Certificate of Status Desired Fee Required
City & State	0	City & State				Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	 -	Country		8. This corporation owes or has paid the current year Intangible
24	25 9, Name and Address of Curr	29	30	30		Personal Property Tax due June 30. Ves No 10. Name and Address of New Registered Agent
5.45		ient vehiereien when		81	Name	10. Haille allu Address of New Neglistered Agent
MITCHELL, BRUCE A.						
REINMAN, HARRELL, GRAHAM, MITCHELL & WATTW				82 Street Address (P.O. Box Number is Not Acceptable)		
	25 S RIVERVIEW DRIVE					
ME	ELBOURNE FL 32901			63		
				84	City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0	1502 and 607.1508. Florida Sta	itutes, the al	DOVE	a-named i	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	Signature, typod or printed name of registered	agent and trie if applicable (f)	NOTE: Registered	d Age	nt signature (required when reinstating) DATE
12.	OFFICERS A	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PTS	DELETE	1.1 T)	TLE		Change Addition
NAME				12 NAME M		MADOFF, LEVERA M. 1640 SANDPIPER ST.
STREET ADDRESS	1640 SANDPIPER STREET		1.3 STREET ADDRESS 🖊		ADDRESS	1640 SANDPIPER ST.
CITY-ST-ZIP	MERRITT ISLAND FL		1.4 CI	1Y-S	T-ZIP	MEKRITT ISLAND, FL 32952
TITLE		DELETE	2 1 Ti	TLE		☐ Change ☐ Addition
NAME			22 N			
STREET ADDRESS	. 2		23 ST	2.3 STREET ADDRESS		
CITY-ST-ZIP			2 4 0		ST-ZIP	
TITLE	☐ DELETE			31 THILE		Change
NAME			32 N/			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP		☐ DELETE			ST-ZIP .	Change Addition
TITLE			4.1 TO			El Change El Adollon
NAME			4. 2 N		, nonnean	j
STREET ADDRESS					ADDRESS	
CITY+ST-ZIP		DELETE	4.4 CC 5.1 Til		1-219	Change Addition
TITLE		- peter	5.1 III			
NAME CTOSET ADDRESS					ADDOLES	
STREET ADDRESS					ADDRESS	-
CITY+ST-ZIP TITLE		DELETE	5.4 CI 6.1 TII		1-ZIP	Change Addition
NAME			6.2 NA			
STREET ADDRESS					ADDRESS	
						İ
CITY-ST-ZIP	certify that the information supplied	with this filing does not qualif	€ 6.4 Cl ² v for the exe			d 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 this 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.