

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED

96 SEP -3 AM 9:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S54165 (3)

1. Corporation Name

COMPETITIVE FINANCIAL SERVICES CORPORATION

Principal Place of Business

8005 S. INDIAN RIVER DRIVE
SUITE 153
FT. PIERCE FL 34982
US

Mailing Address

8005 S. INDIAN RIVER DRIVE
SUITE 153
FT. PIERCE FL 34982
US



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****225.00 ****225.00

2. Principal Place of Business

21 8005 S. INDIAN RIVER DRIVE

Suite, Apt. #, etc.

22 ST. LUCIE

23 FT. PIERCE FLA

City & State

24 34982

Zip

25 ST. LUCIE

Country

2a. Mailing Address

26 8005 S. INDIAN RIVER DRIVE

Suite, Apt. #, etc.

27 ST. LUCIE

City & State

28 FT. PIERCE FLA

City & State

29 34982

Zip

30 ST. LUCIE

Country

3. Date Incorporated or Qualified
05/20/1991

3a. Date of Last Report
08/14/1995

4. FEI Number

59-3067766

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 190.032,
Florida Statutes

Yes ☐ No ☒

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PIOWATY, TIMOTHY W.
8005 S. INDIAN RIVER DRIVE
SUITE 153
FT. PIERCE FL 34982

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

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

Signature typed or printed below in block capital letters (last name first)

Date of Signature (Month/Day/Year)

Date of Filing (Month/Day/Year)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DPS
PIOWATY, TIMOTHY W.
8005 S. INDIAN RIVER DRIVE
FT. PIERCE FL

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PIOWATY, TIMOTHY W.
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81. TITLE
82. NAME
83. STREET ADDRESS
84. CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

Timothy W. Piowaty
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Aug. 1, 1996 407-6589
Date Date

CR2E034 (12/95)