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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # \$96339

(4)

Principal Peace	ANSFERS. INC EX PARK DR. STE 300	Mailing Address  *PAYROLL TRANSFERS. INC 3710 CORPOREX PARK DR. TAMPA FL 33819-1160			
				3. Date Incorporated or Qualific	d 3a. Date of Last Report 03/18/1996
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
	PRINCESS PALM AVE.		ESS PALM A	ve 59-3095857	Not Applicable
Suite, Apt		Suite, Apt. #, etc.	304	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	0	City & State		6. Election Campaign Financing	\$5.00 May Be
23 7/4/	MPA FC	28 TAMPA	FL	Trust Fund Contribution	Added to Fees
71p 24 33	6/9 25 USA	<sup>2ip</sup> 336/9 3	Country  O USA	This corporation has liability florida Statutes	for intangible tax under s. 199.032,  Yes 1 No
24] ~ • •	9. Name and Address of Current		1 37,	10. Name and Address of New	
DOU	IGHERTY, MICHAEL H.		81 Name	AC N 1/000 -1/4	10
	CORPOREX PARK DRIVE			TAS D. HARRINGTO dress_(P.O. Box Number is Not Accept	Dable)
SUIT	E 300		10002	PRINCESS PALM	AVÉ.
TAM	PA FL 33619		63 50	ITE 304	
			84 City	<u> </u>	FL 85 Zip Code 3336/9
11 Pursuant	to the provisions of Sections 607.0502	and 607 1508 Florida Statutes	the above-named co	YMPA	numera of changing its registered
office or r	to frice provisions of Sections 607,0002 registered agent, or both, in the State of im familiar with and accopt the obligat	of Florida. Such change was au	thorized by the corpor	ation's board of directors. I hereby ac	cept the appointment as registered
ageni La	im tamiliar with and accept the obligat				
	-1// N()		ida statutes.		4/9/97
SIGNATURE	Superior typed or proved name of registered agent	avenation	<u></u>		4/9/97 DATE
	Thomas V. L	and life if applicable (NOTE:	<i>\( \( \)</i>	uired when reinstating) ADDITIONS/CHANGES TO OF	DATE FICERS AND DIRECTORS IN 12
SIGNATURE	Superior Typind or privated name of registered again OFFICERS AND	and little if applicables (NOTE:	By Mered Agent signature req	uliad when reinstating) ADDITIONS/CHANGES TO OF	DATE FICERS AND DIRECTORS IN 12
SIGNATURE  12. TITLE NAME	Support of project control of project control of the stand of the stan	e and title of applicable (NOTE: DIRECTORS) DELETE	13. 1.1 TITLE 1.2 NAME	ADDITIONS/CHANGES TO OF	DATE FICERS AND DIRECTORS IN 12 Change Addition
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4. To hereby contry 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 endicated on this annual upport or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the coporation or the receiver or trustee empowered to execute this report as required by Chapter 807, Florida Statutes, and that my name appears in Block 12 or Block 12 or changed, or on an exactment with an address.

SIGNATURE:

INTURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OFFICER OFFICER OFFICER OF SIGNING OFFICER OFFICER

4/9/97 (813) 623-577

**FILED** 

Apr 29 1997 8:00am

Secretary of State

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