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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

Corporation Name

DOCUMENT # V37839

(0)

UNITED COLLECTION SERVICES, INC.

UNITEL	O COLLECTION SERVICES,	1110:					
Principal Place	of Business	Mailing Address			FIRST AND IND IREAL MARKETING	åis 2161) G1811 A181	i Alakt Billis Albii 1881
3079 E. COMMERCIAL BLVD. 3079 E. COMMERCIAL E			BLVD.				
#200		#200	22200				
FT. LAUDERDALE FL 33306 FT. LAUDERDALE FL 33 US US			33300		 Date Incorporated or Qualified 05/18/1992 	3a. Date of L 06/20	ast Report /1995
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26	_ ·		65-0332133		Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State	¬ ·		Election Campaign Financing Trust Fund Contribution	S \$5.00 May Be Added to Fees	
Zip	Country	Zip	Cour	ntry	8. This corporation has liability for it		der s. 199.032,
24	25	29	30		Florida Statutes Yes No 10. Name and Address of New Registered Agent		nl
	9. Name and Address of Curre	nt Registered Agent		81 Name	10. Name and Address of New A	adiate an vise	
FISHER, ROMAN				82 Street Addr	iress (P.O. Box Number is Not Acceptable)		
3079 E COMMERCIAL BLVD. FT. LAUDERDALE FL 33308			}	83			
FI. LAU	JUERDALE PL 33308		1				El Zo Codo
				84 City	ration submits this statement for the pur	┡┖╵	5 Zip Code
SIGNATURE	Signature, typod or printed name of registered ago OFFICERS A	nt and title if applicable IN	IOTE Registered	Agent signature require	ed when reinstating) ADDITIONS/CHANGES TO OFFI		
TITLE	D	☐ DELETE	1. 1 T	ITLE			hange 🔲 Addition
NAME	FISHER, ROMAN		1.2 N	AME			
STREET ADDRESS	705 POINCIANA DR.		1.3 \$1	FREET ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE FL			TY-ST-7IP			hange Addition
TITLE	D	DELETE	2 1 7				indings [] Addition
NAME	KAGAN, ROBERT	n	22 N	ame Ireet adoress			
STREET ADDRESS	3122 E. COMMERCIAL BLVI FT. LAUDERDALE FL	ν.		IT-ST-ZIP			
CITY-ST-ZIP	FI. LAUDENDALE FL	DELETE	3 1 1				change
NAME		_	3 2 N				
STREET ADDRESS	, }		33 8	TREET ADDRESS			
CITY-ST-ZIP				ITY-ST-ZIP			Shanna FT Addition
TITLE		DEFELE	4. 1 T				Change Addition
NAME			42N	1			
STREET ADDRESS	5		1	TREET ADDRESS			
CITY-ST-ZIP		☐ DELETE	4.4 C 5 1 1	ITY-ST-ZIP			Change Addition
TITLE			52N	I .			
NAM:				TREET ADDRESS			
STREET ADDRESS	·		•	CITY-ST-ZIP			
CITY-ST-ZIO TITLE		DELETE		TITLE			Change Addition
NAME		_	6.2 N	lamē .			
STREET ADDRESS	s 1		635	STREET ADDRESS			
CITY-S1-ZIP		$\gamma = \Lambda$	640	CITY - ST - ZIP			
14. I do here certify the cath: the	eby certify that the information supplemat the information indicated on this at at Lam an officer or director of the bors in Block 12 or Block 13 if changed, or	d with this fling is voluntarily fundal reportion supplemental all phration or the receiver or trustion an attachment with an ac	nnual report :tee embowe	i does not qualify is true and accu ered to execute t	of for the exemption stated in Section 119 rate and that my signature shall have the this report as required by Chapter 607, F	r.uz(3)(K), Florid e same legal eff lorida Statutes;	ect as if made under and that my name

SIGNATURE: SIGNATURE

THE OF PART NAME OF SIGNING OFFICER OR DIRECTOR

-16-96 9

154 172-8000 Deptine 1 172-8000