## 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

DOCUMENT # V59747 (8)									
•	LICK PROPERTY SERVICE	S, INC.							
							HARI IRAN BERN ANDN		ALAN BIBN HAN
Principal Place	of Business	Mai	ling Address						
14624 BALGOWAN RD MIAMI LAKES FL 33016 US			15476 NNV 77TH CT SUITE 426 MIAMI LAKES FL 33010			Date Incorporated or Qualified			
			US			08/21/1992		Last Rep <b>/23/19</b> 9	
2. Principal Place of Business		—₁	a. Mailing Address			4. FEI Number			oplied For
Suite, Apt. #, etc.		26	Suite, Apt. #, etc.			65-0351383		/	ot Applicable
22		27	o			5. Certificate of Status Desired		8 <b>.75</b> Fee Re	Additional
City & State		F	City & State			6. Election Campaign Financing		\$5.00	
Zip	Country	28		Country		Trust Fund Contribution		Added t	to Fees
24	25	29		30		8. This corporation has liability for Florida Statutes	r intangible tax ui s ∷ No	nders 1	99.032,
	<ol><li>Name and Address of Current</li></ol>	nt Registe	ered Agent	81		10. Name and Address of New		ent	
WILLIAM FALLER AND ASSOCIATES INC. 6878 WEST ATLANTIC BLVD. MARGATE FL 33063				82	Street Add	dress (P.O. Box Number is Not Accepta	ble)		
familiar with SIGNATURE	h, and accept the obligations of, Sec	tion 607.05	i05, Florida Statutes		oranor a pos	pration submits this statement for the pure and of directors. Thereby accept the app	P-L.	IS Zip C ng its reg stered aç	
12.	Signar ire, typed or printed rame of registered agent and the I OFFICERS AND DIREC				i. Signature re jun		DATE		
TIFLE	P		DELETE	1 1 TITLE	·	ADDITIONS/CHANGES TO OFF	FICERS AND DIR	·—··	3 IN 12 Addition
NAME	BASILICK, ROGER J.			1.2 NAME				range [	
STREET ADDRESS	14624 BALGOWAN RD			1 3 STREET	ADDRESS				
CITY-ST-ZIP	MIAMI LAKES FL			1.4 CITY - S	I - 21P				
TITLE NAME	ST Basilick, Linda F.		DELETE	2 1 TITLE			☐ Cr	талде [	Addition
STREET ADDRESS	14624 BALGOWAN RD			2.2 NAME					
CITY-S1-ZIP	MIAMI LAKES FL			23 STREET					
TITLE	man Date 12		DELETE	2 4 CITY - S 3 1 TILLE	I - ZIP				
NAME				3 2 NAME		-,	. 🗆 CF	range [	Addition
STREET ADDRESS				3.3 STREET	ADDRESS				
CITY - ST - ZIP				3.4 CITY - \$1	-ZiP				
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NAME				4.2 NAME					
STREET ADDRESS				4.3 STREET	ADDRESS				Í
CITY-ST-ZIP THTLE			E) DELLY	4 4 CITY - ST	- 21P				
NAME			☐ DELITE	5 1 TITLE			☐ Ch	ange [	Addition
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DITY-ST-ZIP				5 3 STREET	1				ļ
TITLE			DELETE	5 4 CITY-SI 6 1 TIFLE	ZIF				7 444:0
NAME				6 2 NAME			☐ Ch.	ange	] Addition
STREET ADDRESS				63 STREET A	DDRESS				
CITY-ST-ZIP				6.4 CrTY - ST					

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 appears in Block 12 or SIGNATURE: ROSER J. BASILICK PRESIDENT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 8, 1996 (305)826-2931