## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000002280

Entity Name: SERVE INTERNATIONAL, INC.

FILED Feb 12, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 26536 EVERT STREET LEESBURG, FL 34748 **Current Mailing Address: New Mailing Address:** 26536 EVERT STREET LEESBURG, FL 34748 FEI Number: 20-2438907 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ZIOR, SCOTT ZIOR, SCOTT REV 26536 EVERT STREET 26536 EVERT STREET LEESBURG, FL 34748 US LEESBURG, FL 34748 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: SCOTT ZIOR 02/12/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete ZIOR, SCOTT REV Name: Name: 26536 EVERT STREET Address: Address: City-St-Zip: LEESBURG, FL 34748 City-St-Zip: Title: () Delete Title: () Change () Addition Name: ZIOR, BRENDA MRS Name: Address: 26536 EVERT STREET Address: City-St-Zip: LEESBURG, FL 34748 City-St-Zip: Title: ( ) Delete Title: () Change () Addition CLARKE, DOUGLAS MR Name: Name: 4997 ROBIN COURT Address: Address: City-St-Zip: FREDERICK, MD 21701 City-St-Zip: Title: ( ) Delete Title: () Change () Addition CACIOPPO, JOSEPH DO Name: Name: 2008 HARDWICK STREET Address: Address: City-St-Zip: BLACKSBURG, VA 24060 City-St-Zip: Title: Title: () Delete () Change () Addition HUSSEY, TERRI MRS Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: SCOTT ZIOR P 02/12/2008

3707 GASTON AVE. #216

DALLAS, TX 75246

Address:

City-St-Zip: