

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2000 8:00 am
Secretary of State

05-19-2000 90003 042 ***158.75

DOCUMENT # P99000088155

1. Entity Name
SERVE-EM.COM, INC.

Principal Place of Business 10800 NORTH MILITARY TRAIL, SUITE 213 PALM BEACH GARDENS FL 33410	Mailing Address 10800 NORTH MILITARY TRAIL, SUITE 213 PALM BEACH GARDENS FL 33410-6527
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 606 NORTH OLIVE AVE	3. Mailing Address 606 NORTH OLIVE AVE
Suite, Apt. #, etc. 2d FLOOR	Suite, Apt. #, etc. 2d FLOOR

City & State WEST PALM BEACH, FL	City & State WEST PALM BEACH, FL	4. FEI Number 65-0972348	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
Zip 33401	Country	Zip 33401	Country	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

COOK, STEPHEN L
10800 NORTH MILITARY TRAIL, SUITE 213 / 106
PALM BEACH GARDENS FL 33410

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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 *Stephen L Cook* (NOTE: Registered Agent signature required when reinstating) DATE **4/28/2000**

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

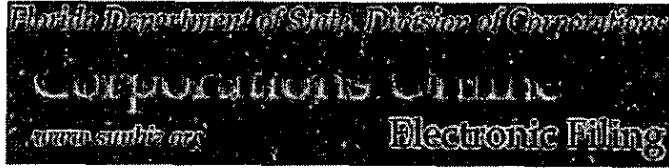
10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	P/D ROBERT GIBSON
STREET ADDRESS		STREET ADDRESS	606 N. OLIVE AVE., 2d FLOOR
CITY-ST-ZIP		CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	S/D SUDHAR VINJAMURI
STREET ADDRESS		STREET ADDRESS	606 N. OLIVE AVE., 2d FLOOR
CITY-ST-ZIP		CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	D TERRY COOPERHILL
STREET ADDRESS		STREET ADDRESS	606 N. OLIVE AVE., 2d FLOOR
CITY-ST-ZIP		CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	D STEPHEN COOK
STREET ADDRESS		STREET ADDRESS	606 N. OLIVE AVE., 2d FLOOR
CITY-ST-ZIP		CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	D ROBERT HALL
STREET ADDRESS		STREET ADDRESS	606 N. OLIVE AVE., 2d FLOOR
CITY-ST-ZIP		CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	D ANN CLANTON
STREET ADDRESS		STREET ADDRESS	606 N. OLIVE AVE., 2d FLOOR
CITY-ST-ZIP		CITY-ST-ZIP	WEST PALM BEACH, FL 33401

13. I hereby certify 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 indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Stephen L Cook* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE **4-28-2000** DAYTIME PHONE # **800-757-8336**

CR2E04 (9/99)



Uniform Business Report

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Document Number
P99000088155
Business Entity Name
SERVE-EM.COM, INC.

Election Campaign Financing Trust Fund Contribution Yes No
Current Year Intangible Personal Property Tax Owed Yes No

Officer/Director Name And Address

Title	P/D		
Name (Last, First, Middle, Title)	Gibson	Robert	
Entity Name			
Street Address	606 North Olive Ave., 2nd FL		
City, State	West Palm Beach	FL	
Zip Code & Country	33401		

Title	S/D		
Name (Last, First, Middle, Title)	Vinjamuri	Sudhir	
Entity Name			
Street Address	606 North Olive Ave., 2nd FL		
City, State	West Palm Beach	FL	
Zip Code & Country	33401		

Title	D		
Name (Last, First, Middle, Title)	Coggeshall	Terry	
Entity Name			
Street Address	606 North Olive Ave., 2nd FL		
City, State	West Palm Beach	FL	
Zip Code & Country	33401		

Title	D
Name (Last, First, Middle, Title)	Cook Stephen
Entity Name	
Street Address	606 North Olive Ave., 2nd FL
City, State	West Palm Beach FL
Zip Code & Country	33401

Title	D
Name (Last, First, Middle, Title)	Hall Robert
Entity Name	
Street Address	606 North Olive Ave., 2nd FL
City, State	West Palm Beach FL
Zip Code & Country	33401

Title	D
Name (Last, First, Middle, Title)	Clanton Ann
Entity Name	
Street Address	606 North Olive Ave., 2nd FL
City, State	West Palm Beach FL
Zip Code & Country	33401

Add additional Officers/Directors No additional Officers/Directors

An individual named above must type their name in the 'Officer/Director Signature' block below. A corporate name is not allowed in this block.

Title	E
Officer/Director Signature	Robert Gibson

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