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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STA

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700049008 (0)

SERV-A-COMP, OF PINELLAS INC.

Principal Place of Business

Mailing Address

FILED Mar 26 1998 8:00am Secretary of State



12600 SOUTH BELCHER ROAD #101-D LARGO FL 33773	12600 SOUTH BELCHER R LARGO FL 33773	OAD #101-D	DO NOT WRITE IN TH	S SPACE
			3. Date Incorporated or Qualified 06/04/1997	
Principal Place of Business The Principal Place of Business The Principal Place of Business	2a. Mailing Address 26		4. FEI Number 59-3450618	Applied For Not Applicable
Suite, Apt. #, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stale	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country 25	Z(p)	Country	8. This corporation owes or has paid the o	<u> </u>
g. Name and Address of Curren		80]	Personal Property Tax due June 30. 10. Name and Address of New Registers	Yes □ No d Agent
ACCOUNTING & TAX HELP, INC: 8089 PARK BOULEVARD #A SEMINOLE FL 89777 81 Name JOHN C. ASCI+ 82 Street Address (P.O. Box Number is Not Acceptable) 72 AOO S. BELLHUR 101-D 83 84 City LARGO FL 85 Zip Code 33 773				
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered gent of both, in the State of Florida, Suich change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with find accept the obligations of Section 607,0505, Florida Statutes. SIGNATURE Signary byed or probed ourse of registered agent and line of applicable. (NOTE: Rigistative Agent signature required when reinstating) DATE (NOTE: Rigistative Agent signature required when reinstating)				
12. OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE PRES OIR	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME JOHN C. ASCH		1.2 NAME		
STREET ADDRESS 12608 S. BELLETER	- 101-D	1.3 STREET ADDRESS		
CITY-ST-ZIP LARGO, FL 3377	2	1.4 CITY - ST - ZIP		
JAMES W. CARLOCK	VP DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME 1527 EDEN ISLE NO	4162	2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
TITLE	DELETE	2. 4 CITY - ST - ZIP		
NAME	□ Detete	3.1 TITLE		Change Addition
STREET ADDRESS		3.2 NAME		
CITY-ST-ZIP		3.3 STREET ADDRESS		:
TITLE	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE	DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-2IP		5.4 CITY-ST-ZIP		
TITLE	☐ DELETE	6.1 TITLE		Change Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		
14. I hereby certify that the information supplied will indicated on this annual report or supplemental officer or director of the corporation or the rece Block 12 or Block 13 if changed, or on an allego	i annual report is true and accur iver or trustee empowered to ex	ate and that my signatur	re shall have the same legal ettect as it made i	inder eath: that I am ac I