

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000046082

**Entity Name:** SERVICESNAP, INC.

**Current Principal Place of Business:**

227 SW 2ND AVENUE  
FORT LAUDERDALE, FL 33301

**Current Mailing Address:**

227 SW 2ND AVENUE  
FORT LAUDERDALE, FL 33301 US

**FEI Number:** 65-1106624

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

KASSOVER, BRUCE H  
1180 S.W. 15TH STREET  
BOCA RATON, FL 33486 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           VP  
Name           TRIPP, MICHAEL  
Address        2865 NE 25TH STREET  
City-State-Zip: FORT LAUDERDALE FL 33305

Title           VP  
Name           KASSOVER, BRUCE  
Address        1180 SW 15TH STREET  
City-State-Zip: BOCA RATON FL 33486

Title           VP  
Name           STERNE, ROBIN  
Address        227 SW 2ND AVE.  
City-State-Zip: FORT LAUDERDALE FL 33301

*I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MICHAEL TRIPP

VP

02/25/2019

Electronic Signature of Signing Officer/Director Detail

Date