

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S68736

Entity Name: AXIOM SERVICES, INC.

Current Principal Place of Business:

1805 DREW ST
CLEARWATER, FL 33765

Current Mailing Address:

1805 DREW ST
CLEARWATER, FL 33765 US

FEI Number: 59-3082969

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHELIN, HETHA
1805 DREW ST
CLEARWATER, FL 33765 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 CEO, PRESIDENT, DIRECTOR
Name GREENBAUM, DAVID
Address 1805 DREW ST
City-State-Zip: CLEARWATER FL 33765

Title VP
Name CLARK, EDWARD
Address 1805 DREW ST
City-State-Zip: CLEARWATER FL 33765

Title SECRETARY
Name CHELIN, HETHA
Address 1805 DREW ST
City-State-Zip: CLEARWATER FL 33765

Title DIRECTOR
Name MISSONIS, ANGIE
Address 1805 DREW ST
City-State-Zip: CLEARWATER FL 33765

Title DIRECTOR
Name HAGGERTY, BRENDAN
Address 1805 DREW ST
City-State-Zip: CLEARWATER FL 33765

Title DIRECTOR
Name DUANE, RICE
Address 1805 DREW STREET
City-State-Zip: CLEARWATER FL 33765

Title DIRECTOR
Name KENNISTON, FREDRICK
Address 1805 DREW STREET
City-State-Zip: CLEARWATER FL 33765

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: HETHA CHELIN

SECRETARY

04/05/2016

Electronic Signature of Signing Officer/Director Detail

_____ Date