

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

FILED
Apr 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 370599

1. Corporation Name

FIDELITY SERVICE CORPORATION

Principal Place of Business

Mailing Address

1750 E. Sunrise Blvd.
Fort Lauderdale, FL

1750 E. Sunrise Blvd.
Fort Lauderdale, FL 33304

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/01/70	
21 Suite, Apt. #, etc.	22 City & State	26 Suite, Apt. #, etc.	27 City & State	4. FEI Number 59-1320420	Applied For Not Applicable
23 Zip	25 Country	29 Zip	30 Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No					

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CARVALHO, JEAN
1750 E. SUNRISE BLVD.
FT. LAUDERDALE, FL 33304

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent, and title if applicable

(NOTE: Registered Agent's signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPC	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GRIECO, FRANK V.	12 NAME	
STREET ADDRESS	1750 E. SUNRISE BLVD.	13 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE, FL	14 CITY-ST-ZIP	
TITLE	VP	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHERVONY, ANNE	22 NAME	
STREET ADDRESS	1750 E. SUNRISE BLVD.	23 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE, FL	24 CITY-ST-ZIP	
TITLE	S	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CARVALHO, JEAN	32 NAME	
STREET ADDRESS	1750 E. SUNRISE BLVD.	33 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE, FL	34 CITY-ST-ZIP	
TITLE	T	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EANES, JASPER	42 NAME	
STREET ADDRESS	1750 E. SUNRISE BLVD.	43 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE, FL	44 CITY-ST-ZIP	
TITLE	D	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WINNINGHAM, CHARLIE II	52 NAME	
STREET ADDRESS	1040 NE 45 ST,	53 STREET ADDRESS	
CITY-ST-ZIP	OAKLAND PARK, FL	54 CITY-ST-ZIP	
TITLE		61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Jean Carvalho

Jean Carvalho

2-23-98 (954) 760-5018

CR2E034 (10/97)