Apr-30-02 10:37A

FILED
May 27, 2002 8:00 am
Secretary of State
05-27-2002 90438 045 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 393496

1. Entity Name
DAYTONA SERVICE CORPORATION

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
532 N. SEGRAVE ST.	532 N. SEGRAVE ST
Suite, Apt #, etc.	Suite, Apt #, etc.
City & State: DAYTONA BEACH, FL	City & State: DAYTONA BEACH, FL
Zip: 32114-2699 Country	Zip: 32114-2699 Country

DO NOT WRITE IN THIS SPACE

4. FEI Number: 59-1382022 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: ROJAK, GLEN T.
Street Address (P.O. Box Number is Not Acceptable): 532 N. SEGRAVE ST.
City: DAYTONA BEACH **FL** Zip Code: 32114-2699

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 ______ DATE

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

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
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

TITLE	PD.	TITLE	
NAME	ROJAK, GLEN T.	NAME	
STREET ADDRESS	532 N. SEGRAVE ST.	STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BEACH, FL 32114-2699	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
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STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Glen T. Rojak pres. GLEN T. ROJAK 4/30/02 386-763-0199
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #