2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 622487

Entity Name: 3D SERVICE, INC.

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3-D SERVICE, INC 3-D SERVICE, INC 4002 E. 7TH AVE 4002 E. 7TH ÁVE TAMPA, FL 336064507 TAMPA, FL 33605

Current Mailing Address: New Mailing Address:

3-D SERVICE, INC 3-D SERVICE, INC 4002 E. 7TH AVE 4002 E. 7TH ÁVE TAMPA, FL 336064507 TAMPA, FL 33605

FEI Number: 59-1917075 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SPRAGUE, PATRICK F 7211 N DALE MABRY SUITE 202 TAMPA, FL 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition DARVILLE, LORENE M DARVILLE, LORENE M Name: Name: 3109 WEST CASS 3109 WEST CASS Address: Address: City-St-Zip:

TAMPA, FL City-St-Zip: TAMPA, FL 33609

Title: DT Title: () Delete (X) Change () Addition DARVILLE, CLYDE A DARVILLE, CLYDE A Name: Name:

6766 RALSTON BCH CIRCLE 6766 RALSTON BCH CIRCLE Address: Address: TAMPA, FL 33614 City-St-Zip: TAMPA, FL City-St-Zip:

Title: Title: (X) Change () Addition () Delete PD

DARVILLE, WALTER J DARVILLE, WALTER J Name: Name: 3109 WEST CASS 3109 WEST CASS Address: Address: City-St-Zip: TAMPA, FL City-St-Zip: TAMPA, FL 33609

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CLYDE DARVILLE SEC. 04/30/2009