2001	UNIFORM BUS	INESS REPO	RT (UB	R)	F	ILED	_	
1. Entity Nam	MENT # 629837 E SOUTH CORP.				Feb 01, 2 Secreta	001 08:0 ary of St		<i>:</i> .
Principal Plac		Mailing Address						-
RUSKIN 33570	FL	RUSKIN 33570	FL					
2. Principal P	Place of Business	3. Mailing Address P.O. BOX 915						
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			DO	NOT WRITE IN THIS	SPACE	–
City & State	e FL	City & State VALRICO	FL		FEI Number 9-1954786		— <u>; </u>	oplied For
Zip 33619	Country	Zip 33595	Country	5.	Certificate of Status	Desired X	\$8.75 Ad Fee Require	
KUCCI 603 27TH ST RUSKIN		L	Name SERVIO Street / 10126 V	CE JAM	Box Number is Not A		Agent	
33570			City TAMP	·		F	Zip Cod 33619	 le
Tax filing r (See criter	JAMES W. SERVICE Signature, typed or printed name of registered agent a pration is eligible to satisfy its Intangible requirement and elects to do so. ria on back)	7.8.3.9		.00	einstating) 10. Election Can Trust Fund C	DATE		00 May Be
11.	OFFICERS AND		12.		DDITIONS/CHANGE	S TO OFFICERS AN	ID DIRECTOR	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP KUCCI JOSEPH RJR. 603 27TH ST SE RUSKIN	☐ Delete FL 33570	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SERVICE 10126 WOO TAMPA	JAMES W ODBERRY ROAD	, FL	Change 33619	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delate	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			" -	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
of the cor	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee emport or on an attachment with an address, we URE: JAMES W. SERVICE	true and accurate and that in twered to execute this report with all other like empowered.		have the same apter 607, Flori		de under oath; that t my name appears		
**		RINTED NAME OF SIGNING OFFICER	OR DIRECTOR		Date		Daytime Phone #	

Daytime Phone #

Date