

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

FILED
Feb 12 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **821691**
1. Corporation Name
POWERSERVE INTERNATIONAL, INC.

(3)



DO NOT WRITE IN THIS SPACE

Principal Place of Business 4400 ALAFAYA TRAIL ORLANDO FL 32826		Mailing Address 4400 ALAFAYA TRAIL ORLANDO FL 32826	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29	
3. Date Incorporated or Qualified 07/29/1968		4. FEI Number 25-1193025	
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

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

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 date if applicable

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

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PO	1.1 TITLE	D/P
NAME	SCHULER, A.P.	1.2 NAME	D. R. Branton
STREET ADDRESS	4400 ALAFAYA TRAIL	1.3 STREET ADDRESS	4400 Alafaya Trail
CITY-ST-ZIP	ORLANDO FL 32826	1.4 CITY-ST-ZIP	Orlando, FL 32826
TITLE	D	2.1 TITLE	D/VP
NAME	FRIDAY, M.D.	2.2 NAME	M. G. Verbonitz
STREET ADDRESS	4400 ALAFAYA TRAIL	2.3 STREET ADDRESS	5722 Clinton Drive
CITY-ST-ZIP	ORLANDO FL 32826	2.4 CITY-ST-ZIP	Houston, TX 77020
TITLE	S	3.1 TITLE	
NAME	BACHY, D.M.	3.2 NAME	
STREET ADDRESS	11 STANWIX ST.	3.3 STREET ADDRESS	
CITY-ST-ZIP	PITTSBURG PA 15222	3.4 CITY-ST-ZIP	
TITLE	T	4.1 TITLE	
NAME	MORF, C.E.	4.2 NAME	
STREET ADDRESS	11 STANWIX ST.	4.3 STREET ADDRESS	
CITY-ST-ZIP	PITTSBURG PA 15222	4.4 CITY-ST-ZIP	
TITLE	AS	5.1 TITLE	
NAME	FLYNN, C.J.	5.2 NAME	
STREET ADDRESS	4400 ALAFAYA TRAIL	5.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32826	5.4 CITY-ST-ZIP	
TITLE	AS	6.1 TITLE	
NAME	CARPENTER, V.J.	6.2 NAME	
STREET ADDRESS	11 STANWIX ST.	6.3 STREET ADDRESS	
CITY-ST-ZIP	PITTSBURG PA 15222	6.4 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:

A. M. Bachy

D. M. Bachy, Secretary

1/30/98 412-652-5260

CR2E034 (10/97)