

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 29, 2001 8:00 am
Secretary of State

08-29-2001 90011 032 ***550.00

DOCUMENT # F8000000 1771
1. Entity Name
 Service United States Corporation

Principal Place of Business **Mailing Address**

2. Principal Place of Business **3. Mailing Address**
 202 North Main Street 202 North Main Street
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State **City & State**
 Natick, MA Natick, MA

Zip **Country** **Zip** **Country**
 01760 USA 01760 USA

A0082869

DO NOT WRITE IN THIS SPACE

4. FEI Number 04-2631184 **Applied For**
 Not Applicable

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

6. Name and Address of Current Registered Agent **7. Name and Address of New Registered Agent**

CT Corporation
 1200 South Pine Island Road
 Plantation, FL 33324

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL **Zip Code**

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** _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. **FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE President/Secretary <input type="checkbox"/> Delete	Kevin O'Flaherty	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	106 Hollingsworth Ave.	NAME	
STREET ADDRESS	Braintree, MA 02184	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE Vice President/Treasurer <input type="checkbox"/> Delete	Robert Weintraub	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	74 Stearns Rd.	NAME	
STREET ADDRESS	Marlboro, MA 01752	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE Director <input type="checkbox"/> Delete	Kevin O'Flaherty	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	202 North Main Street	NAME	
STREET ADDRESS	Natick, MA 01760	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE Director <input type="checkbox"/> Delete	Robert Weintraub	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	202 North Main Street	NAME	
STREET ADDRESS	Natick, MA 01760	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

3. 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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE  **Kevin O'Flaherty** **8/15/01** **(508) 651-8704**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Telephone Number

CR2E034 (11/00)