


**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jan 15, 2004 8:00 am**  
**Secretary of State**

440

01-15-2004 90004 001 \*\*\*150.00

<b>DOCUMENT # F0000001771</b>			
1. Entity Name <b>SERVICE UNITED STATES CORPORATION</b>			
Principal Place of Business 202 N. MAIN STREET NATICK, MA 01760		Mailing Address 202 N. MAIN STREET NATICK, MA 01760	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number <b>04-2631184</b>		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent <b>C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324</b>		7. Name and Address of New Registered Agent	
Name		Name	
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable)	
City		City	Zip Code
FL			
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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____		DATE _____	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)			
<p><b>FILE NOW!!! FEE IS \$160.00</b> After May 1, 2003 Fee will be \$550.00 Amended UBR is \$612.00 Make Check Payable to Florida Department of State</p>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	DPS <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	O'FLAHERTY, KEVIN	NAME	
STREET ADDRESS	106 HOLLINGSWORTH AVENUE	STREET ADDRESS	
CITY-ST-ZIP	BRAINTREE, MA 02184	CITY-ST-ZIP	
TITLE	VPTD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WEINTRAUB, ROBERT	NAME	
STREET ADDRESS	74 STEARNS ROAD	STREET ADDRESS	
CITY-ST-ZIP	MARLBORO, MA 01752	CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	O'FLAHERTY, KEVIN	NAME	
STREET ADDRESS	202 NORTH MAIN STREET	STREET ADDRESS	
CITY-ST-ZIP	NATICK, MA 01760	CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WEINTRAUB, ROBERT	NAME	
STREET ADDRESS	202 NORTH MAIN STREET	STREET ADDRESS	
CITY-ST-ZIP	NATICK, MA 01760	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
12. 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 file this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other files empowered.			
SIGNATURE: _____		1/9/04 (508)651-8704	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Cell Phone #	

CRFB034 (10/02)

~~Attachment~~

700000001771 44002150  
**FRANCHEK & PORTER, LLO**

COUNSELORS AT LAW

85 DEVONSHIRE STREET  
BOSTON, MASSACHUSETTS 02109

TEL. 617.573.0020

FAX 617.723.0977

WWW.FRANCHEKPORTER.COM

January 12, 2004

Uniform Business Report  
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Re: Annual Report Filing for Service United States Corporation

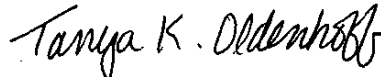
Dear Sir/Madam:

Enclosed for filing with respect to Service United States Corporation please find the following documents:

1. 2003 For Profit Corporation Uniform Business Report; and
2. Check made payable to the Florida Department of State in the amount of one hundred and fifty dollars (\$150.00).

If you have any questions or concerns with respect to the enclosed, please do not hesitate to contact the undersigned.

Sincerely,



Tanya K. Oldenhöff

Enclosures

cc: Andrew M. Porter, Esq.