

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

FILED
Jun 12, 2003 8:00 am
Secretary of State

06-12-2003 90010 027 ***550.00

DOCUMENT # F00000001771					
1. Entity Name SERVICE UNITED STATES CORPORATION					
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 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	
C T CORPORATION SYSTEM 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, I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when initiating)					
DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	DPS ☐ Delete		TITLE	☐ Change ☐ Addition	
NAME	O'FLAHERTY, KEVIN		NAME		
STREET ADDRESS	106 HOLLINGSWORTH AVENUE		STREET ADDRESS		
CITY-ST-ZIP	BRAINTREE, MA 02184		CITY-ST-ZIP		
TITLE	VPTD ☐ Delete		TITLE	☐ Change ☐ Addition	
NAME	WEINTRAUB, ROBERT		NAME		
STREET ADDRESS	74 STEARNS ROAD		STREET ADDRESS		
CITY-ST-ZIP	MARLBORO, MA 01762		CITY-ST-ZIP		
TITLE	D ☐ Delete		TITLE	☐ Change ☐ 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 ☐ Delete		TITLE	☐ Change ☐ Addition	
NAME	WEINTRAUB, ROBERT		NAME		
STREET ADDRESS	202 NORTH MAIN STREET		STREET ADDRESS		
CITY-ST-ZIP	NATICK, MA 01760		CITY-ST-ZIP		
TITLE	☐ Delete		TITLE	☐ Change ☐ Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	☐ Delete		TITLE	☐ Change ☐ 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 execute 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, without other like empowered.					
SIGNATURE:			Kevin O'Flaherty (508)651-8704		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date _____ Daytime Phone # _____		

CR2034 (10/02)