

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 FEB 27 PM 12:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F62853** (9)

1. Corporation Name
SERV-QUEEN, INC.

Principal Place of Business
**% BEN SHENKER
705 FENTRESS BLVD.
DAYTONA BEACH FL 32114-1213**

Mailing Address
**% BEN SHENKER
705 FENTRESS BLVD.
DAYTONA BEACH FL 32114-1213**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **01/05/1982** 3a. Date of Last Report **03/28/1994**

4. FEI Number **11-2230547** Applied For ☐ Not Applicable ☐

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

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business
21 **405 N. Charles Street**
Suite, Apt. #, etc.
22
City & State
23 **Daytona Beach FL**
Zip Country
24 **32114 USA**
25
2a. Mailing Address
26 **405 N. Charles Street**
Suite, Apt. #, etc.
27
City & State
28 **Daytona Beach FL**
Zip Country
29 **32114 USA**
30

9. Name and Address of Current Registered Agent

**MCILHONE, SAMUEL
705 FENTRESS BLVD.
DAYTONA BEACH FL 32014**

10. Name and Address of New Registered Agent

81 Name **Samuel McIlhone**
82 Street Address (P.O. Box Number is Not Acceptable) **405 N. Charles Street**
83
84 City **Daytona Beach** FL 85 Zip Code **32114**

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 of current or former registered agent (and filed applicable)

Signature of registered agent to be appointed after filing (and filed applicable)

Date

12. OFFICERS AND DIRECTORS

TITLE **DTS**
NAME **SHENKER, BEN**
STREET ADDRESS **705 FENTRESS BLVD**
CITY ST ZIP **DAYTONA BCH, FL 00000**

TITLE **P**
NAME **MCILHONE, SAMUEL**
STREET ADDRESS **705 FENTRESS BLVD**
CITY ST ZIP **DAYTONA BCH, FL 00000**

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE ☒ Change ☐ Addition
2. NAME
3. STREET ADDRESS
4. CITY ST ZIP
no longer with Serv-Queen, Inc.

2. TITLE **DPTS** ☒ Change ☐ Addition
3. NAME **SAMUEL MCILHONE**
4. STREET ADDRESS **405 N. Charles Street**
5. CITY ST ZIP **Daytona Beach, FL 32114**

3. TITLE ☐ Change ☐ Addition
4. NAME
5. STREET ADDRESS
6. CITY ST ZIP

4. TITLE ☐ Change ☐ Addition
5. NAME
6. STREET ADDRESS
7. CITY ST ZIP

5. TITLE ☐ Change ☐ Addition
6. NAME
7. STREET ADDRESS
8. CITY ST ZIP

6. TITLE ☐ Change ☐ Addition
7. NAME
8. STREET ADDRESS
9. CITY ST ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.071(1)(b), 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 affidavit.

SIGNATURE:

Samuel M. McIlhone
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/22/95 904-257-7795
Date Signature