

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # F95000005278 (5)

1. Corporation Name
UNIVERSAL SERVICE NETWORK, INC.

Principal Place of Business

9880 S. RIDGEVIEW DR.
OAK CREEK WI 53154

Mailing Address

9880 S. RIDGEVIEW DR.
OAK CREEK WI 53154-4904

2. Principal Place of Business

21 9665 S. Twentieth Street
Suite Apt. #, etc.

22 City & State

23 Oak Creek, Wisconsin
Zip Country

24 53154-4931 25 USA

2a. Mailing Address

26 9667 S. 20th Street
Suite Apt. #, etc.

27 City & State

28 Oak Creek, Wisconsin
Zip Country

29 53154-4931 30 USA

9. Name and Address of Current Registered Agent

BOYNTON, WILLIAM D
8751 W. BROWARD BLVD., #204
PLANTATION FL 33324

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 of officer or provision of registered agent and title is applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME ☐ DELETE

PTD
POLASKI, MICHAEL H
9880 S. RIDGEVIEW DR.
OAK CREEK WI 53154

TITLE NAME ☒ DELETE

VSD
PAQUIN, THOMAS L
9880 S. RIDGEVIEW DR.
OAK CREEK WI 53154

TITLE NAME ☐ DELETE

D
PARRISH, PATRICK R
9880 S. RIDGEVIEW DR.
OAK CREEK WI 53154

TITLE NAME ☐ DELETE

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

11 TITLE ☒ Change ☐ Addition

12 NAME POLASKI, MICHAEL H.

13 STREET ADDRESS 9667 S. 20TH ST.

14 CITY - ST - ZIP OAK CREEK, WI 53154

21 TITLE VICE PRES/SEC/DIRECTOR ☐ Change ☒ Addition

22 NAME POLASKI, MICHAEL J.

23 STREET ADDRESS 9667 S. 20TH ST.

24 CITY - ST - ZIP OAK CREEK, WI 53154

31 TITLE ☒ Change ☐ Addition

32 NAME PARRISH, PATRICK R.

33 STREET ADDRESS 9667 S. 20TH ST.

34 CITY - ST - ZIP OAK CREEK, WI 53154

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

14. I do 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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MICHAEL J. POLASKI

3-27-97

Date

414-281-1100

Daytime Phone #

FILED
Apr 02 1997 8:00am
Secretary of State



CR2E034 (9/96)