

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2000 8:00 am
Secretary of State

05-19-2000 90181 015 ***150.00

DOCUMENT # H18986

1. Entity Name

ELECTRONIC SUPPORT SERVICE COMPANY, INC.

Principal Place of Business

10113 CORTEZ RD W
 BAY BEACH PLAZA #6
 BRADENTON FL 34210
 US

Mailing Address

10113 CORTEZ RD
 UNIT 6
 BRADENTON FL 34210-1707
 US

2. Principal Place of Business

5810 42ND ST. EAST

Suite, Apt. #, etc.

3. Mailing Address

5810 42ND ST. EAST

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

BRADENTON FLORIDA

Zip
34203

Country

MANATEE

City & State

BRADENTON FLORIDA

Zip
34203

Country

MANATEE

4. FEI Number

59-2639846

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GERVAIS, RENARD E
 10113 CORTEZ RD W
 LOT 110 40 CT E
 BRADENTON FL 34210

7. Name and Address of New Registered Agent

Name
GERVAIS, RENARD E
 Street Address (P.O. Box Number is Not Acceptable)

5810 42ND ST. EAST

City
BRADENTON

FL

Zip Code
34203

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

[Signature] **MAY 1, 2000**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 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

TITLE	P	<input type="checkbox"/> Delete
NAME	GERVAIS, RENARD	
STREET ADDRESS	10113 CORTEZ RD W.	
CITY-ST-ZIP	BRADENTON FL	
TITLE	V	<input type="checkbox"/> Delete
NAME	GERVAIS, CYNTHIA D	
STREET ADDRESS	10113 CORTEZ RD W	
CITY-ST-ZIP	BRADENTON FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GERVAIS, RENARD	
STREET ADDRESS	5810 42ND ST. EAST	
CITY-ST-ZIP	BRADENTON, FLORIDA 34203	
TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GERVAIS, CYNTHIA D	
STREET ADDRESS	5810 42ND ST. EAST	
CITY-ST-ZIP	BRADENTON, FLORIDA 34203	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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:

[Signature] **MAY 1, 2000**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

941-752-1983

CR2F024 (9/00)