

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

FILED  
Apr 08 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # L64290 (4)  
1. Corporation Name  
SMALL SERVICES UNLIMITED, INC.



Principal Place of Business Mailing Address  
~~7155 WOODCREEK DR~~ ~~7155 WOODCREEK DR~~  
~~SARASOTA FL 34231~~ ~~SARASOTA FL 34231~~  
1208 BELLEFLOWER ST.  
SARASOTA, FL. 34232

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1208 BELLEFLOWER ST. Suite, Apt. #, etc. 22 City & State 23 SARASOTA, FL. Zip 24 34232	2a. Mailing Address 26 SAME Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	3. Date Incorporated or Qualified 04/06/1990 4. FEI Number 65-0194203 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No
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9. Name and Address of Current Registered Agent SMALL, MILDRED E <del>7155 WOODCREEK DRIVE</del> 1208 BELLEFLOWER ST. <del>SARASOTA FL 34231</del> SARASOTA, FL. 34232	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL
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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 Mildred E. Small (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMALL, MILDRED E	1.2 NAME	
STREET ADDRESS	<del>7155 WOODCREEK DR</del> 1208 BELLEFLOWER ST.	1.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL 34232	1.4 CITY-ST-ZIP	
TITLE	VTD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMALL, RICHARD H	2.2 NAME	
STREET ADDRESS	<del>7155 WOODCREEK DR</del> 1208 BELLEFLOWER ST.	2.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL 34232	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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: Mildred E. Small MILDRED E. SMALL 3/31/98 941-364-3309

CR2E034 (10/97)