

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

FILED
May 19 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # L96801 (0)
1. Corporation Name
S S B SERVICE CORP.



Principal Place of Business
1661 CONGRESS AVE.
WEST PALM BEACH FL 33406
1189 HYPOLUXO ROAD
LANTANA FL 33462

Mailing Address
1661 CONGRESS AVE.
WEST PALM BEACH FL 33406
P.O. BOX 20509
WEST PALM BEACH FL 33410

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		4. FEI Number	
22 City & State		27 City & State		65-0214382	
23 Zip		28 Zip		5. Certificate of Status Desired	
25 Country		30 Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
				Applied For	
				Not Applicable	
				8.75 Additional Fee Required	
				5.00 May Be Added to Fees	
				Yes No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
LESHER, GERALD S COONEY, WARD, LESHER & DAMON, P.A. 1555 PALM BEACH LAKES BLVD., STE. 1000 WEST PALM BEACH FL 33401		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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PST	1.1 TITLE	
NAME	NEELEY, BRIAN S	1.2 NAME	
STREET ADDRESS	1661 CONGRESS AVE.	1.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL 33406	1.4 CITY-ST-ZIP	
TITLE	SVP	2.1 TITLE	PRESIDENT, CEO
NAME	JOHNSON, JAMES J	2.2 NAME	
STREET ADDRESS	1661 CONGRESS AVE	2.3 STREET ADDRESS	1189 HYPOLUXO ROAD
CITY-ST-ZIP	WEST PALM BEACH FL	2.4 CITY-ST-ZIP	LANTANA FL 33462
TITLE		3.1 TITLE	ACCOUNTING MANAGER
NAME		3.2 NAME	LINDA EPPENGA
STREET ADDRESS		3.3 STREET ADDRESS	1189 HYPOLUXO ROAD
CITY-ST-ZIP		3.4 CITY-ST-ZIP	LANTANA FL 33462
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
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 _____ 4/28/98

CR2E034 (10/97)