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PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

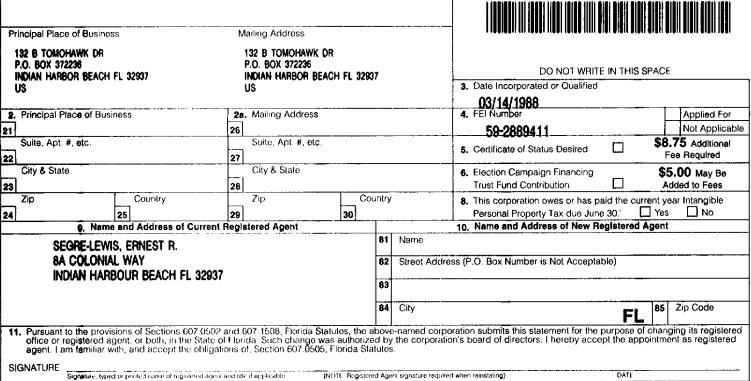
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DIVISION OF CORPORATIONS

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SERVPRO OF SOUTH BREVARD, INC.

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May 06 1998 8:00am
Secretary of State



Signature, typed or printed came of registered agent and title if ripplicable 12, OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ Addition DELETE Change TITLE 1.1 TITLE SEGRE-LEWIS, ERNEST R. NAME 1.2 NAME STREET ADDRESS **8A COLONIAL WAY** 1.3 STREET ADDRESS CITY-ST-ZIP INDIAN HARB BCH FL 1.4 CITY - ST - ZIP Change Addition DELETE 2.1 TITLE TITLE NAME SEGRE-LEWIS, MAUREEN A. 2.2 NAME **BA COLONIAL WAY** 2.3 STREET ADDRESS STREET ADDRESS INDIAN HARB BCH FL 2. 4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 31 TITLE TITLE SEGRE-LEWIS STEVEN RIM ADO W. NEW HAVEN AVE. SEGRE-LEWIS, STEVEN R. 3.2 NAME NAME 1167 SAND DUNE LANE. #205 3.3 STREET ADDRESS STREET ADDRESS MELBOURNE FL WEST MELBOURNE, FL 32904 3.4. CITY-ST-ZIP CITY-ST-7IP DELETE Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY- \$1- ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Change Addition □ DELETE 6.1 TITLE TITLE NAMÉ 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

6.4 CITY-ST-ZIP

14. Thereby 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