Applied For

Not Applicable \$8.75 Additional

1999

City & State



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # N25132

Corporation Name					
MASTERSERVE ASSOCIATES, INC.					
Principal Place of Business	Mailing Address				
•					
P O BOX 9588 FT. LAUDERDALE FL 33310-6588	P O BOX 9588 FT. Lauderdale Fl. 33310-6588				
2. Principal Place of Business	2a. Mailing Address				
21	26				
Suite, Apt. #, etc.	Suite, Apt. #, etc.				

City & State

FILED Apr 29, 1999 8:00 am § Secretary of State

04-29-1999 90205 016 ****70.00



3. Date Incorporated or Qualifed

03/01/1988 4. FEI Number

65-0190502

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25 29 30 Trust Fund Contribution Added to Fees		Country		• • • • • • • • • • • • • • • • • • • •	Country		6. Election Campaign Fi	inancing _	\$5.00	May Be	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent		25	29	30			Trust Fund Contributi		Added t	o Fees	
SITTER, GENE 2528 W. OAKLAND PARK BLVD. FT. LAUDERDALE FL 33311 44 City FL 85 City FL 8							10. Name and Address	of New Regi	stered Agent		
2528 W. OAKLAND PARK BLVD. FT. LAUDERDALE FL 3331? 4 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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 and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE SITTER, GENE C SITTER, OREITA M SITTER, LOREITA M SITTER, LOREITA M SITTER LOREITA					81	Name		,		·	
2528 W. OAKLAND PARK BLVD. FT. LAUDERDALE FL 3331? 4 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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 and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE SITTER, GENE C SITTER, OREITA M SITTER, LOREITA M SITTER, LOREITA M SITTER LOREITA	2528 W. OAKLAND PARK BLVD.				82	Street Add	ress (P.O. Box Number is No	t Acceptable			
### City FL 85 Zip Code ### City FL 85 Zip Code						out of the second of the secon					
### City					83					{	
TI. Pursuant to the provisions of Sections 517.0502 and 617.1509. Florida Statutes, the above-named corporation authritis this statement for the purpose of changing its registered agent. I are familiar with, and accept the obligations of, Section 617.0503. Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. (NOTE: Rugetheed Apert dignatur required when relicitating). DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 12. TITLE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 25. CALCITY-ST-2P 15. TITLE 25. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 25. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 25. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 25. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 25. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 25. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 25. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 25. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 25. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 25. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 25. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 25. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 25. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 25. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 25. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 25. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 25. ADDITIONS/CHANGES TO OFFICERS AND DIRE	1 0	LINDINEE I E GOOTT			84	City			85 Zip (Code	
office or registered agent, or both, in the State of Florida. Such registered agent and manufactures in templated agent and manufactures in templated agent and manufactures of the deplated september of 17.0503. Florida Statutes. Signature Si		•				- •	<u> </u>		FL		
Signature, typed of printed ramen of organizative and rife if applicable. (NOTE Registered Agent degrature required when intentiating) (NOTE Registered Agent degratered A	office or re	edistared agent or hoth in the	State of Florida, Such cha	noe was autho	rized by t	-named corp he corporati	poration submits this stateme on's board of directors. I here	nt for the pure aby accept the	pose of changing its e appointment as re	registered gistered	
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	SIGNATURE	Street use transfer printed name of regists	red agent and title if applicable.	(NOTE: Regi	istered Agent	signatura require	ed when reinstating)	f	DATE		
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I nereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 13.07(3)(f), instead Stateds. There cally that the 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE REQUIRES INTERIOR DIRECTOR

04-27-99

954-735-8800