FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 91190 014 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000036579

1. Entity Name
U.S. ROADSIDE SERVICES, INC.

20031587

Principal Place of Business	Mailing Address
17748 ~~SW 146~~ COURT ~~MIAMI,~~ FL 33177	17748 ~~SW 146~~ COURT ~~MIAMI,~~ FL 33177

2. Principal Place of Business	3. Mailing Address
1536 NE 31 Street	1536 NE 31 Street
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Pompano Bch, FL	City & State: Pompano Bch, FL
Zip: 33064 Country: USA	Zip: 33064 Country: USA

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number ~~65-[illegible]~~ ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

VESPIA, MARK T
~~17748 SW 146 CT~~
~~MIAMI FL 33177~~

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number Is Not Acceptable) 1536 NE 31 Street

City Pompano Bch FL Zip Code 33064

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Mark T Vespia 4-17-03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P VESPIA, MARK 17748 SW 146 CT MIAMI, FL 33177 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
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CR2E034 (10/02)

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Mark T Vespia PRESIDENT 4-17-03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

954-786-1690