

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



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

**FILED**  
95 JAN 25 PM 1:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **P08256** (0)  
1. Corporation Name  
**SERVICE 800 CORPORATION**

Principal Place of Business Mailing Address  
**SUITE 200, 99 WEST PACES PERRY  
ROADS NW ATLANTA GA 30305**

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21		26		12/04/1985	02/02/1994
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FEI Number	Applied For
23 City & State		28 City & State		58-1622451	Not Applicable
24 Zip		29 Zip		5. Certificate of Status Desired	\$8.75 Additional Fee Required
25 Country		30 Country		<input type="checkbox"/>	<input type="checkbox"/>
				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
				<input type="checkbox"/>	<input type="checkbox"/>
				8. This corporation has liability for intangible tax under S. 109.032, Florida Statutes	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
<b>CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324</b>				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	President/Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VON BRAUN, LUITPOLD	1.2 NAME	Schall-Riaucour, Georg Graf
STREET ADDRESS	SCHUMANNSTR. 10 8 MUNICH	1.3 STREET ADDRESS	Schumannstr. 10 8 Munich
CITY-ST-ZIP	WEST GERMANY	1.4 CITY-ST-ZIP	West Germany
TITLE	TVD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VON BECKERDORFF, JOBST	2.2 NAME	
STREET ADDRESS	SCHUMANNSTR. 10 8 MUNICH	2.3 STREET ADDRESS	
CITY-ST-ZIP	WEST GERMANY	2.4 CITY-ST-ZIP	
TITLE	SVD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COFER, CARL H.	3.2 NAME	
STREET ADDRESS	3619 TUXEDO ROAD	3.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA GA	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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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; that I am duly authorized or empowered to execute this report as required by Chapter 007, Florida Statutes; and that my name appears in Block 12 or Block 13 in addition, or on an attachment, with an address.

SIGNATURE: \_\_\_\_\_ DATE: 1/18/95  
Signature and typed or printed name of signing officer or director Date Signature Year #