

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2001 8:00 am
Secretary of State

02-05-2001 90065 032 ***150.00

DOCUMENT # P10763

1. Entity Name
INESCO SERVICES, INC.

Principal Place of Business 1315 PEACHTREE ST., N.E. ATLANTA GA 30309	Mailing Address 1315 PEACHTREE ST., N.E. ATLANTA GA 30309
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00015010



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. 200	Suite, Apt. #, etc. 200
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City & State	City & State
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Zip	Country	Zip	Country
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4. FEI Number	NOT APPLICABLE	Applied For
		Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

Name
Street Address (P.O. Box Number is Not Acceptable)
City
State: FL Zip Code

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
D	AGUILAR, LUIS A	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
1315 PEACHTREE ST., N.E.	1315 PEACHTREE ST., N.E.		
ATLANTA GA 30309	ATLANTA GA 30309		
PD	MCCONNELL, DANIEL D	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
1315 PEACHTREE ST., N.E.	1315 PEACHTREE ST., N.E.		
ATLANTA GA 30309	ATLANTA GA 30309		
VP	LAMB, DEBORAH A	<input checked="" type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1315 PEACHTREE ST., N.E.	1315 PEACHTREE ST., N.E.		
ATLANTA GA 30309	ATLANTA GA 30309		
T	RIBES, PAUL	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
1315 PEACHTREE ST., N.E.	1315 PEACHTREE ST., N.E.		
ATLANTA GA 30309	ATLANTA GA 30309		
S	PACCHINO, KIMBERLY	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
1315 PEACHTREE ST., N.E.	1315 PEACHTREE ST., N.E.		
ATLANTA GA 30309	ATLANTA GA 30309		
D	MCCAIN, JAMES F	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
1315 PEACHTREE ST., N.E.	1315 PEACHTREE ST., N.E.		
ATLANTA GA 30309	ATLANTA GA 30309		

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/01 (404) 479-1095
 Date Daytime Phone #

CR2E034 (10/00)