2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mar 13, 2001 8:00 am Secretary of State DOCUMENT # **P93000073138** 1. Entity Name FEDERAL SERVICES CORPORATION 03-13-2001 90002 033 ***158.75 Principal Place of Business Mailing Address 7267 SAN SEBASTIAN DRIVE 7267 SAN SEBASTIAN DRIVE BOCA RATON FL 33433 **BOCA RATON FL 33433** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0460273 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required -----6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KEENAN, KAREN M 2871 N OCEAN BLVD. D516 **BOCA RATON FL 33431** 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, typed or printed name of registered agent and title if applicable 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. TITLE Delete TITLE NAME ESTES. DENNIS J NAME STREET ADDRESS 7267 SAN SEBASTIAN DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 33433 **BOCA RATON FL 33433** TITLE ☐ Delete TITLE NAME ESTES, DONALD E. NAME STREET ADDRESS 7267 SAN SEBASTIAN DR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL** TITLE Change ☐ Delete TITLE ☐ Addition KEENAN, JAMES J. NAME NAME STREET ADDRESS D-516 2871 N. OCEAN BLVD. STREET ADDRESS N. OCEAN CITY-ST-7IP CITY-ST-ZIP **BOCA RATON FL** TITLE Delete TITLE ☐ Change ☐ Addition NAME GRAVES, EUGENE A. STREET ADDRESS 107 YORKTOWN CT. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MEDFORD NJ TITLE Delete TITLE Change ☐ Addition NAME **BLOOM, STANLEY** NAME STREET ADDRESS 7421 ROSEWOOD CIR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL** TITLE ☐ Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 paner like empowered.

FILED