## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 04 1998 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9400037808 (0)

UTILITY SERVICES OF MELBOURNE, INC.

Principal Place of Business Mailing Address							89111 BB(87 (1111 1888) (81	II 80(01 10)( 188(
777 SOUTH FLAGLER DRIVE 777 SOUTH FLAGLER DRIV								
SUITE 200 SUITE 200								
WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33			33401			DO NOT WRIT	TE IN THIS SPACE	
US		US				3. Date Incorporated or Qualified	1	
					·	05/17/1994		
2, Principal Place of Business 2a, Mailing Address						4. FEI Number	<u> </u>	Applied For
21 26 26 26 27 27 28 28 28 28 28 28 28 28 28 28 28 28 28			<del></del>			59-3276234		Not Applicable
Sulte, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired		5 Additional
22							· · · · · · · · · · · · · · · · · · ·	Required
						6. Election Campaign Financing		00 May Be
			Country			Trust Fund Contribution		led to Fees
24	25 29 30			٠,		8. This corporation owes or has p Personal Property Tax due Jun		r Intangible
	9, Name and Address of Currer		30]	·		10. Name and Address of New P		
CT	CORPORATION SYSTEM		8	1 Nar	ne			
1200 S. PINE ISLAND ROAD							,,	
PLANTATION FL 33324			8	2 Stre	et Addre	ddress (P.O. Box Number is Not Acceptable)		
	77777777777		8	3		**************************************	<del></del>	-
			8	4 City	r		FL 85 2	Zip Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statu	tes, the abo	ve-nam	ed corpo	oration submits this statement for the	purpose of changin	n its registered
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	Signature, typed or printed name of registered age	nt and title if applicable (NO	If Registered A	pent signa	ature require	d when reinstating)	DATE	
12.	OFFICERS ANI		13.	-		ADDITIONS/CHANGES TO OFF		ORS IN 12
TITLE	PTD DELETE 1.1 T		1.1 TITLE				☐ Chan	
NAME	<b>\$CHLESINGER</b> , RICHARD		1.2 NAM	1.2 NAME				
STREET ADDRESS 40 RANDALL AVENUE			1.3 STREET ADDRESS		ss			
CITY-ST-ZIP	FREEPORT NY 11520		1.4 CITY - ST - ZIP		-			
TITLE	VSD DELETE		2.1 TITLE	2.1 TITLE			☐ Chan	ge Addition
NAME	<b>\$CHWARTZ, ROBERT</b>		2.2 NAM					
STREET ADDRESS	40 RANDALL AVENUE		23 STRE	ET ADDRES	ss			
CITY-ST-ZIP	FREEPORT NY 11520		2 4 CITY	-ST-ZIP				
TITLE .		DELETE	3.1 TITLE				☐ Chan	ge Addition
NAME			3.2 NAM					
STREET ADDRESS			3.3 STRE	T ADDRES	ss			
CITY-ST-ZIP			3.4. CITY	-ST-ZIP				
TITLE		DELETE	4.1 TITLE				Chang	ge Addition
NAME			4. 2 NAM	E	į.			
STREET ADDRESS			4.3 STRE	T ADDRES	ss			ľ
CITY-ST-ZIP			4.4 CITY	ST-ZIP				
TITLE		DELETE	5.1 TITLE				Chang	ge Addition
NAME			5.2 NAMI					ļ
STREET ADDRESS			5.3 STRE	T ADDRES	ss			
CITY-ST-ZIP			5.4 CiTY-					
TITLE		DELETE	6.1 TITLE				☐ Chang	je Addition
NAME			6.2 NAME					
STREET ADDRESS				T ADDRES	is			
CITY-ST-ZIP			6.4 CITY					

14. 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

Director