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FILED
May 06 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P94 000059956

1. Corporation Name
ALL SERVICE TECHNOLOGIES, INC.
5440 LORI DRIVE SOUTH
JACKSONVILLE FL. 32207

Principal Place of Business

Mailing Address

SAME

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

Aug 1994

2. Principal Place of Business

21 5440 LORI DR. S.

Suite, Apt. #, etc.

22

City & State

23 JACKSONVILLE FL.

Zip

24 32207

Country

25 USA

2a. Mailing Address

26 3042 ALONSO RD

Suite, Apt. #, etc.

27

City & State

28 JACKSONVILLE FL. 32216

Zip

29 32216

Country

30 USA

4. FEI Number

59-3263165

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

VELMA I. MUNCHER
5440 LORI DRIVE SOUTH
JACKSONVILLE FLORIDA 32207

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0507 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 of the person making the change (agent, officer or director)

(Initial) Registered Agent signature required when registering

DATE

12. OFFICERS AND DIRECTORS

TITLE PRESIDENT
NAME VELMA I. MUNCHER
STREET ADDRESS 5440 LORI DRIVE SOUTH
CITY-ST-ZIP JACKSONVILLE FL. 32207

TITLE VICE PRESIDENT
NAME ROBERT D. MAYHUGH
STREET ADDRESS 3042 ALONSO RD
CITY-ST-ZIP JACKSONVILLE FL. 32216

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

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-05/11/98--01019--031
***150.00

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), Florida Statutes. I further certify that the information indicated on this annual report or supplement, financial 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.

SIGNATURE: Velma I. Muncher Velma I. Muncher Pres. 4/23/98 904 6429944

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Signature, Print or Initials

CR2E034 (10/97)