

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2002 8:00 am
Secretary of State

04-18-2002 90358 048 ***150.00

UBR C. U. A1

DOCUMENT # P94000084887

1. Entity Name
OPUS SERVICES, INC.

Principal Place of Business

7375 PEPPERMILL PKWY
NORTH CHARLESTON SC 29418

Mailing Address

7375 PEPPERMILL PKWY
NORTH CHARLESTON SC 29418

2. Principal Place of Business

3041 Faye Rd.
 Suite, Apt. #, etc.

3. Mailing Address

3041 Faye Rd.
 Suite, Apt. #, etc.

City & State

Jacksonville, FL

City & State

Jacksonville, FL

Zip

32226

Country

USA

Zip

32226

Country

USA

4. FEI Number

59-3279617

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SEVINTUNA, NEIL
2963 GULF TO BAY BLVD.
SUITE 270
CLEARWATER FL 34619

7. Name and Address of New Registered Agent

Name

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

City

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

Signature, typed or printed name of registered agent and title if applicable.

(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, 2002 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

TITLE **PD** ☐ Delete
NAME **SEVINTUNA, NEIL**
STREET ADDRESS **7375 PEPPERMILL PARKWAY**
CITY-ST-ZIP **N. CHARLESTON SC 29418**

TITLE **VD** ☐ Delete
NAME **SEVINTUNA, AVA**
STREET ADDRESS **2420 COTTON CREEK DR**
CITY-ST-ZIP **MT PLEASANT SC 29466**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☒ Change ☐ Addition
NAME **Sevintuna, Neil**
STREET ADDRESS **3041 Faye Rd.**
CITY-ST-ZIP **Jacksonville, FL 32226**

TITLE **VD** ☒ Change ☐ Addition
NAME **Sevintuna, Ava**
STREET ADDRESS **3041 Faye Rd.**
CITY-ST-ZIP **Jacksonville, FL 32226**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: *Ava Sevintuna*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/15/02 (904) 861-2700
 Date Daytime Phone #

CR2E034 (9/01)