2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

P95000043400 DOCUMENT

1. Entity Name

STREET ADDRESS

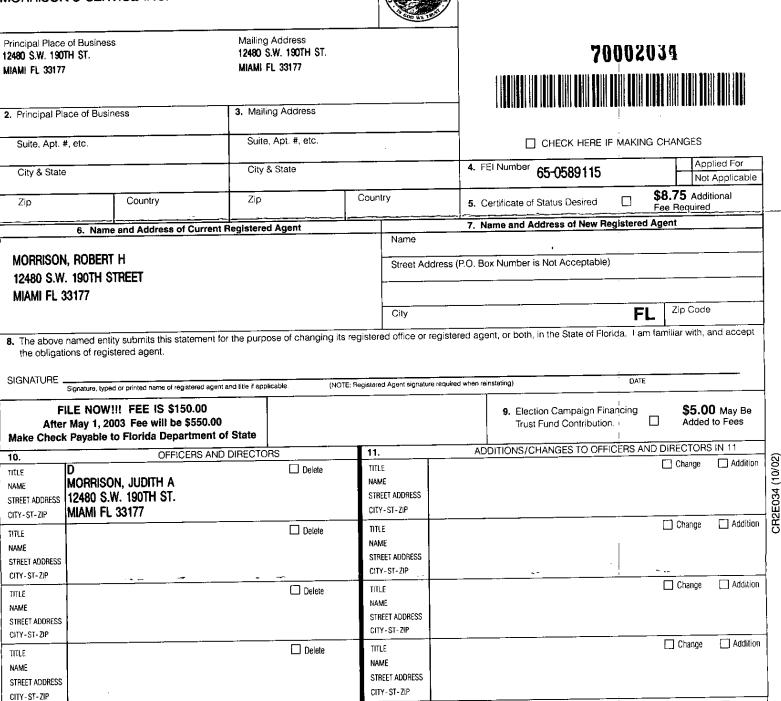
STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

NAME

MORRISON'S SERVICE INC.



12. I hereby certify that the information supplied with this filling 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 10 or Block 11 if changed, or on an attachment with an address, with other like empowered

TITLE NAME STREET ADDRESS

TITLE NAME

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

☐ Delete

SIGNATURE:

ERT H. MIRRISON 1/5/03 305-

Change

Change

Addition

☐ Addition

FILED

Jan 08, 2003 8:00 am

Secretary of State

01-08-2003 90152 009 ***150.00