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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000077225 (7)
1. Corporation Name

PASCO SERVICES, INC.

FILED Mar 31 1998 8:00am Secretary of State

TAGGG GEATTGEGATTG.												
Principal Place of Business Mailing Address) \$8601080 IID \$8181 BINI DDII! 88111 BBNI	1001 10010 1666	I DOL MILL LODE	
95 E HALL RD				PO BOX 262				ļ				
	LAND FL 3295	53		CAPE CANAVERAL FL 32920-0262					DO NOT WRITE IN TH	IIS SPACE		
									3. Date Incorporated or Qualified			
									10/02/1995			
L				n. Mailing Address					4. FEI Number	A	pplied For	
21			26	· • • · · · · · · · · · · · · · · · · ·					<u>59-3336785</u>		ot Applicable	
Suite, Apt.	#, etc.		Suit	Suite, Apt. #, etc.					5. Certificate of Status Desired		Additional	
22		27								equired		
City & State				City & State				6. Election Campaign Financing		May Be		
Zip Country				Zip Country				Trust Fund Contribution		to Fees		
Zip 24	25		— ·			Journay			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.			
[24]	a Name	and Address of Curi	29 ent Registerer	d Agent	30	Ι			10. Name and Address of New Register			
Di						81	Name			· · • · · · · · · · · · · · · · · ·		
	RADSHAW,					Ш						
2498 VICTOR RD						82	Street A	Addres	s (P.O. Box Number is Not Acceptable)			
COCOA FL 32926						83						
						84	City			as 7in	Code	
						04	City		F	L 85 Zip		
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.												
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.												
SIGNATURE	Signature, broad	or printed name of registered	and the dans	licabie (NO)	F. Benislare	d Ana	ol sionature I	required s	when reinstating) DAT	F		
12.	Olgridatore typica		ND DIRECTOR		13.	D rigo	or organization	required	ADDITIONS/CHANGES TO OFFICERS /		RS IN 12	
TITLE	D			DELETE	1.1 7	TLE	Т			Change	Addition	
NAME	BRADS	HAW, FRANK M			1.2 N	AME						
	STREET ADDRESS 2496 VICTOR ROAD				1.3 STREET ADDRESS							
CITY-ST-ZIP	00001 EL 00000			1.4 0		ITY-S	T-ZIP					
TITLE				DELETE	2.1 Ti					Change	☐ Addition	
NAME					2.2 N	AME						
STREET ADDRESS					2.3 \$	TREET	ADDRESS					
CITY-ST-ZIP					2.40	ary-s	ST-ZIP					
TITLE				DELETE	3.1 1	TLE				Change	Addition	
NAME	[3.2 N	AME						
STREET ADDRESS					3.3 S	TREET	ADDRESS					
CITY-ST-ZIP	_				3.4. 0	ITY-S	ST-ZIP					
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NAME					4.21	AME						
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CITY-ST-ZIP	·				4.4 C	ITY-S	T- ZIP					
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NAME					5.2 N	ame						
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CITY-ST-ZIP					5.4 C	ITY-S	1-7IP		·			
TITLE				DELETE	6.1 TI	TLE				Change	Addition	
NAME					6.2 N	AME	1				j	
STREET ADDRESS					6.3 \$	TREET	ADDRESS					
CITY-ST-ZIP	<u> </u>	·			6.4 C	ITY-S	1-ZIP					

14. Thereby 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 suppliermental 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 coeriver 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.

CIGNATURE - L. A. M. Ryadshir

3/27/98 407-452-8448

R2F034 (10/97)