2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2004
Secretary of State

DOCUMENT# P96000055496

Entity Name: NEVCO SERVICE SYSTEMS, INC.

Current Principal Place of Business:

1400 SW 52 TERRACE
PLANTATION, FL 33317

New Principal Place of Business:

Current Mailing Address:

1400 SW 52 TERRACE
PLANTATION, FL 33317

New Mailing Address:

FEI Number: 65-0680614 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAMBDIN, CLAYBORN M
1400 SW 52 TERRACE
PLANTATION, FL 33317

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: LAMBDIN, CLAYBORN M.
Address: 1400 SW 52 TERRACE
City-St-Zip: PLANTATION, FL

Title: ST ( ) Delete
Name: CLAYBORN, LAMBDIN M
Address: 1400 SW 52 TERRACE
City-St-Zip: FORT LAUDERDALE, FL 33317

Title: VP ( ) Delete
Name: HUDDLESON, CHAD R
Address: 1630 NW 128 DR, APT 107
City-St-Zip: FORT LAUDERDALE, FL 33323

Title: D ( ) Delete
Name: SCHELL, JOHN F
Address: 3940 SW 61 AVE.
City-St-Zip: DAVIE, FL 33314

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: LAMBDIN, CLAYBORN M.
Address: 1400 SW 52 TERRACE
City-St-Zip: PLANTATION, FL 33317

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change ( ) Addition
Name: SCHELL, JOHN F
Address: 3940 SW 61 AVE.
City-St-Zip: DAVIE, FL 33314

Title: D ( ) Change (X) Addition
Name: LAMBDIN, CLAYBORN M
Address: 1400 SW 52 TERRACE
City-St-Zip: PLANTATION, FL 33317

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CLAYBORN M. LAMBDIN PSTD 03/16/2004

Electronic Signature of Signing Officer or Director — Date