SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

P96000057700 (2)

NATIONAL AMERISERVE, INC.

Principal Place of Business Mailing Address

9000 WEST SHERIDAN STREET #103 VERO BEACH FL 32968 US

4660 1ST ST. VERO BEACH FL 32968

HILL, ROBERT 4660 1ST ST. VERO BEACH FL 32968

65-0677707 Trust Fund Contribution

tion owes or has paid the current year Intangible operly Tax due June 30. Yes [] No
Address of New Registered Agent
\\0\\\\\
ber is Not Acceptable)
FL 85 Zip Code
1

3. Date Incorporated or Qualified

07/09/1996

Sep 30 1998 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

Applied For

Added to Fees

Not Applicable \$8.75 Additional Fee Required \$5.00 May Be

11. Pursuant to the provisions of socions 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.				
SIGNATURE				
	Signature, types or proted name of registered agent and title it applicable	INCITE Registered Agent signature		
12.	OFFICERS AND DIRECTORS		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TIT£€	STD [_]DELET	£ 1.1 TITLE	Change Addition	
NAME	HILL, KENNETH D	1.2 NAME		
STREET ADDRESS	167 ANCHOR DRIVE	1.3 STREET ADDRESS		
CITY-ST-ZIP	VERO BEACH FL 32963	1.4 CITY-ST-ZIP		
1111.6	PD	E 21 TITLE	Change Addition	
NAME	HILL, ROBERT K	2.2 NAME		
STREET ADDRESS	4660 1ST ST.	2.3 STREET ADDRESS		
CITY-S1-ZIP	VERO BEACH FL	2.4 CITY-ST-ZIP		
TITLE	DELFT	2 311IILE	Change Addition	
NAVE	,	3.2 NAME		
STREET ADDRESS	•	3 3 STREET ADDRESS		
CITY-ST-ZIP		3.4 CrTY-ST-ZIP		
TITLE	DELETI	4.17I7LE	Change Addition	
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4,4 Crty-ST-ZIP		
TITLE	DELETI	E 5.1 THTLE	Change Addition	
NAME		5.2 NAME		
STREE1 ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP	<u></u>	
TITLE	DELETE	E 61 TITLE	200102652 Grange Addition	
NAME		6 2 NAME	_09/20/0001022000 49	
STREET ADDRESS		6.3 STREET ADDRESS	-03/30/9801077050 330 ***550.00	
CITY-ST-ZiP		6 4 CHY-S1-ZIP	475	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption settled in section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplied ental 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 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.