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Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90060 016 ***150.00

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000026660

1. Corporation Name

SERVICE SOUTH POINT INC.

| Principal Place of Business | Maifing | Address | | | | 1111 8841 1881 |
|---|--|------------------------|--|---|----------------------|----------------|
| 3110 NW 88 AVENUE | 3110 N | w 88 avenue | | | | |
| APT. 108 | APT. 10 | 18 | | DO NOT MICHTE IN TH | UO 004.05 | |
| SUNRISE FL 33351 SUNRISE FL 33351 | | E FL 33351 | | DO NOT WRITE IN THIS SPACE | | - |
| | | | | 3. Date Incorporated or Qualifed 03/19/1997 | | |
| 2. Principal Place of Business | | iling Address | • | 4. FEI Number | App | ied For |
| 21 3110 NW 88 | AV 26 31 | 10 nm 88 | <u> </u> | 65-0738479 | Not | Applicable |
| Suite, Apt. #, etc. | ⊢ . | te, Apt. #, etc. | | 5. Certificate of Status Desired | \$8.75 A | |
| 22 10B | | | | | | |
| City & State | | y & State Jn/rfSC | | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 A Added to | |
| 23 Sunrise | 28 <u>5</u> puntry , Zip | | Country | This corporation owes the current year | | |
| | | 3351 30 | 7.000.0000 | Personal Property Tax. | | ⊇No |
| <u> </u> | ddress of Current Registere | | U 5 124 1 | 10. Name and Address of New Registere | | |
| 3. Hullio una A | <u> </u> | | 81 Name | | | |
| RODRIGUEZ, ENRIQUE M | | | 00 04 | (D.O. Day Mumber is Not Assentable) | | |
| 3110 NW 88 AVENUE | | | 82 Street Ad | dress (P.O. Box Number is Not Acceptable) | | ļ |
| APT. 108 | | | 83 | | | |
| SUNRISE FL 33351 | | | | <u></u> | lest 7in C | - |
| | | | 84 City | F | L 85 Zip C | Jua) |
| 11. Pursuant to the provisions of | Sections 607.0502 and 607.1 | 508, Florida Statutes, | , the above-named co | rporation submits this statement for the purpose | of changing its r | egistered |
| office or registered agent, or | both, in the State of Florida. S accept the obligations of, Sec | such change was auth | norized by the corpora | ation's board of directors. I hereby accept the ap | pointment as reg | sterea |
| 1 | accept the obligations of, co. | 54011 001.0000, 11011- | | | | |
| SIGNATURE Signature, typed or printed | name of registered agent and title if app | icable. (NOTE: Re | egistered Agent signature requ | ired when reinstating) DATE | _ | |
| 12. | OFFICERS AND DIRECTO | | 13. | ADDITIONS/CHANGES TO OFFICERS | | |
| TITLE D | | ☐ DELETE | 1.1 TITLE | | ☐ Change | Addition |
| NAME RODRIGUEZ, E | | | 1.2 NAME | | | |
| STREET ADDRESS 3110 N.W. 88 | \VE. #108 | | 1.3 STREET ADDRESS | , | | Ì |
| CITY-ST-ZIP SUNRISE FL 33 | | | 1.4 CITY-ST-ZIP | | | |
| TITLE FLANAGEY | Codave M | ☐ DELETE | 2.1 TITLE | | Change | ☐ Addition |
| NAME ROATING | Enrique M Se Ave . #108 | | 2.2 NAME | · | | } |
| STREET ADDRESS 3110 ACC 4 | 21 No (| | 2.3 STREET ADDRESS | | وسداد سراران | . ~~* |
| CITY-ST-ZIP SUNN'S | FL 33351 | | 2.4 CITY-ST-ZIP | | | - |
| TITLE | | ☐ DELETE | 3.1 TITLE | | ☐ Change | ☐ Addition |
| NAME | | | 3.2 NAME | | | |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | | | . 1 |
| CiTY-ST-ZIP | | | 5.5 OTTLET ADDITION | | | , |
| TITLE | | | 3.4. CITY-ST-ZIP | | Character 1 | - Addison |
| NAME | | ☐ DELETE | 3.4. CITY-ST-ZIP 4.1 TITLE | | ☐ Change | Addition |
| STREET ADDRESS | | ☐ DELETE | 3.4. CITY-ST-ZIP 4.1 TITLE 4. 2 NAME | | Change | ☐ Addition |
| STREET ADDRESS | | DELETE | 3.4. CITY-ST-ZIP 4.1 TITLE | | Change | Addition |
| CITY-ST-ZIP_ | | | 3.4. CITY-ST-ZIP 4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP | | | |
| 1 | | ☐ DELETE | 3.4. CITY-ST-ZIP 4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE | | ☐ Change | Addition |
| CITY-ST-ZIP TITLE NAME | | | 3.4. CITY-ST-ZIP 4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME | | | |
| CITY-ST-ZIP TITLE | | | 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS | | | |
| CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ DELETE | 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP | | ☐ Change | Addition |
| CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | | | 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE | | | |
| CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ DELETE | 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP | | ☐ Change | Addition |

14. 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 annual report or supplemental 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP