## 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 # P97000046295 (6)

SERVICE CHOICE, INC.

Principal Place of Business	Mailing Address
1030 NORTH ORANGE AVENUE SUITE 104 ORLANDO FL 32801	1030 NORTH ORANGE AVENU SUITE 104 ORLANDO FL 32801
CHLANDO PL 32801	URLANDO FL 32801

## **FILED** Apr 16 1998 8:00am Secretary of State

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/22/1997 Principal Place of Business Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be 6, Election Campaign Financing  $\Box$ 23 28 Trust Fund Contribution Added to Fees Ζıp Country Zip Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes Yes 24 30 25 20 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name THARP, PHILIP A 1030 NORTH ORANGE AVENUE Street Address (P.O. Box Number is Not Acceptable) SUITE 104 83 ORLANDO FL 32801 84 Zip Code City 85 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. SIGNATURE Signature, typed or printed name of registered agent and title it applicable (NOTE Registered Agent signature required when reinstating) CR2E034 (10/97) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETÉ 1.1 TITLE Change TITLE <del>-THARP, PHILIP</del> 1.2 NAME NAME 3501 5. ORANGE BLEM. TR. #100 -1000 NORTH-ORANGE AVENUE 1.3 STREET ADDRESS STREET ADDRESS -ORLANDO-FL 82801 ORLANDO, FL 32839 CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE UPST Addition HIRSCHY BOBBIE NAME 2.2 NAME 3501 5, GRAUGE BLSM.TR. #/00 2.3 STREET ADDRESS STREET ADDRESS ORLANDO, FL 32839 2 4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change TITLE 3 1 TITLE Addition 32 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELFTE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition TITLE 5.1 TITLE NAME 5 2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5 4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** City-St-ZiP 6.4 CITY-ST-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 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 trues the 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 or ap attachment with an address.

4-8-98