DOCUMENT # P97000075909				
SERVICE SPECIALISTS, INC.				02 JUL 16 PM 3: 09
DO NOT WRITE IN THIS SPACE				SECRETARY OF STATE FALLAHASSEE.FLORIDA
2. Principal d	Place of Business 70 04KL PS.	3. Mailing Address Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE
City & Sta	ate VIL FL.	City & State	\)	4. FEI Number Applied For Not Applicable
<u>'333</u>	5/4 USA	24	Country	5. Certificate of Status Desired S8.75 Additional Fee Required 7. Name and Address of Current Registered Agent
DO NOT WRITE IN THIS SPACE Street Address (P.O. Box Number is Not Acceptable) TO A				
8. The above named printy is completely a state of the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE SIGNATURE SIGNATURE Signature, typeolog printed name of registered agent and title if applicable. WOTE Registered Agent agent and title if applicable.				
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) OFFICERS AND DIRECTORS (MOTE: Registered Agent signature requirement and select signature requirement and select signature requirement and elects to do so. After May 1, Fee is \$150,00 Amended UBR is \$61,25 Make Check Payable to Department of \$			10. Election Campaign Financing \$5.00 May Be	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D SIGILFREDO PODPIGI 10101 SW 53 d CT COOPER CITY, FL	us> TP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,		TITLE NAME STREET ADDRESS CITY-ST-ZIP	900055975495 -05/22/0201045015 *****35.00 *****35.00
NAME STREET ADDRESS CITY-ST-ZIP			NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE
NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP	IN THIS SPACE
NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP	
NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST, ZIP	900055975495 -07/16/0201058023 *****26.25 ******26.25
13. 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 of the corporation or the reperter or this tee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an analysis of the corporation or the reperter or this tee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an analysis of the corporation of the reperter of the corporation of the corpor				