

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 28 PM 1:59

DOCUMENT # S17675 (7)

1. Corporation Name
SERV-NET USA, INC.

Principal Place of Business
~~351 15 AVE S~~
~~38~~
JACKSONVILLE BCH FL 32250

Mailing Address
P O BOX 30842
JACKSONVILLE BCH FL 32250
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 12/07/1990
3a. Date of Last Report 06/27/1994
4. FEI Number 59-3048381
Applied For
Not Applicable

2. Principal Place of Business
21 5317 Fairmont Street
Suite, Apt. #, etc.
22 City & State Jacksonville, FL
23 Zip 32207 Country USA
2a. Mailing Address
26 5317 Fairmont Street
Suite, Apt. #, etc.
27 City & State Jacksonville, FL
28 Zip 32207 Country USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

YOUNGBLOOD, JIMMY B., JR.
~~427 6TH AVE NO~~
JACKSONVILLE BCH FL 32250

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 927 6th Avenue North
83
84 City
85 Zip Code FL

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 of Registered Agent or President or Secretary)

(Signature of Registered Agent or President or Secretary)

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE DP
12 NAME YOUNGBLOOD, JIMMY B., JR
13 STREET ADDRESS 927 6 AVE N
14 CITY, ST, ZIP JACKSONVILLE BCH FL

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.02(4)(b), 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 make this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on an attachment with an addition.

SIGNATURE: J. B. Youngblood, Jr. Jimmy B. Youngblood, Jr. 1/13/95 (904) 399-1006
SIGNATURE AND TYPED, OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR