

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S68736

FILED  
Jan 27, 2011  
Secretary of State

Entity Name: AXIOM SERVICES, INC.

**Current Principal Place of Business:**

1805 DREW ST  
CLEARWATER, FL 33765 US

**New Principal Place of Business:**

**Current Mailing Address:**

1805 DREW ST  
CLEARWATER, FL 33765 US

**New Mailing Address:**

FEI Number: 59-3082969

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CHELIN, HETHA  
1805 DREW ST  
CLEARWATER, FL 33765 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: CDP  
Name: GREENBAUM, DAVID  
Address: 1805 DREW ST  
City-St-Zip: CLEARWATER, FL 33765

Title: V  
Name: CLARK, EDWARD  
Address: 1805 DREW ST  
City-St-Zip: CLEARWATER, FL 33765

Title: S  
Name: CHELIN, HETHA  
Address: 1805 DREW ST  
City-St-Zip: CLEARWATER, FL 33765

Title: D  
Name: ELSY, GARDNER  
Address: 1805 DREW ST  
City-St-Zip: CLEARWATER, FL 33765

Title: D  
Name: HAGGERTY, BRENDAN  
Address: 1805 DREW ST  
City-St-Zip: CLEARWATER, FL 33765

Title: D  
Name: CHELIN, ANGIE  
Address: 1805 DREW ST  
City-St-Zip: CLEARWATER, FL 33768 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: HETHA CHELIN

S

01/27/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date