

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2000 8:00 am
Secretary of State

04-24-2000 90034 008 ***150.00

DOCUMENT # S89078

i. Entity Name

U.S. FEDERAL BUSINESS SERVICES INC.

Principal Place of Business S MANHATTAN AVE L FL 33611	Mailing Address 12431 KELSO RD. THONOTOSASSA FL 33612-3356 118
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 1222 Rainbrook Cir. Suite, Apt. #, etc.	3. Mailing Address 1222 Rainbrook Cir. Suite, Apt. #, etc.
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City & State Valrico, FL	City & State Valrico FL
Zip 33594	Country Hillsb.

4. FEI Number 59-3091343	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

TIFFIN, JOHN S.
 % FOWLER, WHITE, GILLEN, BOGGS
 501 E. KENNEDY BLVD., SUITE 1700
 TAMPA FL 33602

7. Name and Address of New Registered Agent

Name Nueesch, Fritz W.
 Street Address (P.O. Box Number is Not Acceptable)
 1222 Rainbrook Circle
 City Valrico FL Zip Code 33594

8. 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 *Fritz Nueesch, Pres.* DATE 4-18-00

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input checked="" type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NUEESCH, FRITZ 12431 KELSO RD THONOTOSASSA FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	NUEESCH, SHERRY 12431 KELSO RD THONOTOSASSA FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Fritz Nueesch, Pres.* DATE 4-18-00 DAYTIME PHONE # 661-2985

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/99)