

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P25804

Entity Name: RAPAD WELL SERVICE COMPANY INC.**Current Principal Place of Business:**217 WEST CAPITOL STREET
SUITE 201
JACKSON, MS 39201**Current Mailing Address:**217 WEST CAPITOL STREET
SUITE 201
JACKSON, MS 39201 US**FEI Number:** 64-0683312**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US*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

Officer/Director Detail :Title PTD
Name JAMES, WILLIAM R
Address 217 W. CAPITOL ST.
City-State-Zip: JACKSON MS 39201Title VSD
Name CALHOON, RICK J
Address 217 W. CAPITOL ST.
City-State-Zip: JACKSON MS 39201Title V
Name HOLBROOK, ROBBIE H
Address 217 W CAPITOL ST.
City-State-Zip: JACKSON MS 39201Title V
Name WILSON, DONALD E
Address 217 W CAPITOL ST
City-State-Zip: JACKSON MS 39201Title V
Name MASSENGILL, ERBIE
Address 217 W CAPITOL ST
City-State-Zip: JACKSON MS 39201Title V
Name JAMES, CHESLEY R
Address 217 W CAPITOL ST
City-State-Zip: JACKSON MS 39201Title OTHER
Name BRADSHAW, FRANK CPA
Address 1052 HIGHLAND COLONY PARKWAY
SUITE 100
City-State-Zip: RIDGELAND MS 39157

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: FRANK J. BRADSHAW

CPA

01/18/2019

Electronic Signature of Signing Officer/Director Detail

Date