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

CORPO ANNUA	OFIT DRATION L REPORT D96		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS				
DOCUM	ENT # H92 9	998	3 (4)				
1. Corporation N. BOB G	^{ame} Raham Cleaning Sei	RVICE CORPO	RATION				
Principal Place of 2310 NW 38T LAUDERDALE		2310 8	Mailing Address 2310 NW 38TH TERRACE LAUDERDALE LAKES FL 33311			Oplified	3a. Date of Last Report
						3. Date Incorporated or Qualified 01/03/1986	11/09/1995
2. Principal Place	e of Business	2a. Mailing	Address			4. FEI Number 59-2693459	Applied For Not Applicable
Suite, Apt. #,	etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
22		27 City &	City & State			6. Election Campaign Financing	\$5.00 May Be
City & State		28	31a e			Trust Fund Contribution	Added to Fees
Zip	Country	· — []			This corporation has liability for Florida Statutes	intangible tax under s 199.032, s No	
24	9. Name and Address of Cu	29 rrent Registered A	1	30		10. Name and Address of New	Registered Agent
ONE E. FT.LAU	BAUM, RICHARD L ESQ BROWARD BLVD. #1500 DERDALE FL 33301			82 83 84	Crty	ress (P.O. Box Number is Not Accepta	FL 85 Zip Code
or registered familiar with	d agent, or both, in the State of i, and accept the obligations of.	Section 607.0505, I	lorida Statutes.	ony the corp	Circulation of Evolution	oration submits this statement for the proof of directors. Thereby accept the applications are selected when releasing	urpose of changing its registered office pointment as registered agent. I am
12.	ignature, typed or printed name of registered OFFICERS	S AND DIRECTORS		13.		ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12
TITLE	PD Graham, Robert		DELFTE	1 1 TITLE 1.2 NAME			Change Addition
STREET ADDRESS	2310 NW 38TH TERRA	CE			I ADDRESS		
CITY-ST-ZIP	The Fi			1 4 C-TY-ST-ZIP 2 : TITLE			Change Addition
NAME STREET ADDRESS			Land	2.2 NAME 2.3 STREE	i adoress		
CITY-ST-ZIP				2 4 C-TY -			Change Addition
TITLE NAME			DELETE	3 1 TITLE 3 2 NAME			
STREET ADDRESS				3.3 STREE	ST - ZIP		
CITY-ST-ZIP T.TLE			DELETE	4 i Tille			☐ Change ☐ Addition
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREE 4.4 CiTY-	-1 ADDRESS -ST - Z:P		
CITY - ST - ZIP			DELET€	5 1 TITLE			Change Addition
NAME.				5.2 NAME			
STREET ADORESS					1 ADDRESS		
CITY-ST-ZIP			DELETE	5 4 CiTY 6 1 TiTLI		<u> </u>	Change Addition
TITLE				6 2 NAMI			
NAME	1						

64 City St-Zip

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 119.07(3)(k). 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 cath; 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 12 or Bigol. 13 if changed, or on an attachment with an address.

SIGNATURE: _

LAL COLLEGE OR DIRECTOR ROBERT Graham 4-8-76 305-731-0034