

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

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **P16217** (2)

1. Corporation Name

ISS CLEANING SERVICES GROUP, INC.

Principal Place of Business

**375 HUDSON ST
NEW YORK NY 10014-0658**

Mailing Address

**375 HUDSON ST
NEW YORK NY 10014-0658**

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 APR -6 AM 10:03

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

10/01/1987

3a. Date of Last Report

08/09/1994

4. FEI Number

13-3083344

Applied For

☐ Not Applicable

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

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYES ST.
STE. 105
TALLAHASSEE FL 32301**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

65

Zip Code

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	CEO
NAME	SLIPSAGER, HENRIK
STREET ADDRESS	8 W. 65TH ST.
CITY - ST - ZIP	NEW YORK NY
TITLE	VP
NAME	DUDAS, MICHAEL
STREET ADDRESS	299 WILLOW WAY
CITY - ST - ZIP	CLARK NJ
TITLE	VPS
NAME	ATKINS, ROBERT E JR.
STREET ADDRESS	22 PARKSIDE DR.
CITY - ST - ZIP	GREAT NECK NY
TITLE	AS
NAME	JACOVETTI, FRANK
STREET ADDRESS	1540 E. 38TH ST.
CITY - ST - ZIP	BROOKLYN NY
TITLE	VP
NAME	CARROLL, ROBERT J
STREET ADDRESS	P. O. BOX 533 N/A, 6 HOYT RD.
CITY - ST - ZIP	PT. RIDGE NY
TITLE	VP
NAME	STABLE, ROBERT C
STREET ADDRESS	3 GUTHRIE CT.
CITY - ST - ZIP	E. NORTHPORT NY

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PRESIDENT & CEO	☒ Change	☒ Addition
1.2 NAME	DENNIS J. SPINA		
1.3 STREET ADDRESS	8 Stone House Road		
1.4 CITY - ST - ZIP	CALIFON, NEW JERSEY 07830		
2.1 TITLE		☐ Change	☐ Addition
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY - ST - ZIP			
3.1 TITLE		☐ Change	☐ Addition
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY - ST - ZIP			
4.1 TITLE		☐ Change	☐ Addition
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY - ST - ZIP			
5.1 TITLE	VICE PRESIDENT	☒ Change	☒ Addition
5.2 NAME	MARTIN Mc DONOUGH		
5.3 STREET ADDRESS	172 ASPEN STREET		
5.4 CITY - ST - ZIP	FLORAL PARK, N.Y. 11001		
6.1 TITLE		☐ Change	☐ Addition
6.2 NAME			
6.3 STREET ADDRESS			
6.4 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 110.07(2)(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 execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Frank J. Jacovetti

ASSISTANT SECRETARY

3/24/95

212-229-4000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(Signature Required)