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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUM						
1. Corporation	MENT # <b>P9200</b>	0005620 (9	)			
· ·	MAINTENANCE CO.INC.					
S11111 11	THE PERSON NAMED OF STREET					
Chinainal Plans	of Ducinose	Mailing Address				
Principal Place		•				
8800 49TH S'	F. NORTH	8800 49TH ST. NORTH #406-3				
PINELLAS PK	FL 34666	PINELLAS PK FL 34666	3	3. Date Incorporated or Qualified	3a. Date of Last R	eport
				11/16/1992	05/16/199	•
2. Principal Pla		2a. Mailing Address	Le alexander D	4. FEI Number	<b>├</b> ── ∤-	Applied For
21 /44 /	77 WALSINGHAM.	K()26 / 44 / / WH Suite, Apt. #, etc.	LSINGHAM K	<u>i) 59-3150898</u>		Not Applicable Additional
Suite, Apt. #	r, etc.	27		5. Certificate of Status Desired	1 1	Required
City & State		City & State		6. Election Campaign Financing	\$5.0	0 May Be
23 LAR	60 FL	20 - 11100	FL	Trust Fund Contribution	☐ Adde	d to Fees
Zp Zl11.	44 Country	<sup>29</sup> 34644	Country 30	This corporation has liability for Florida Statutes ☐ Yes	intangible tax under s : \textbb No	199.032,
24 346	9. Name and Address of Curren	<u></u>	[30]	10. Name and Address of New F		
			81 Name	WAINA CILLIA	UNC AU	<u> </u>
GAWRO	n, mary		82 Street Ac	Idress (P.O. Box Number is Not Acceptate	YDENK!	V
9209 SE	MINOLE BLVD.					
UNIT 17			83 11/2	65 SHARON	OR_	
SEMINO	LE FL 34642		84 City	01 61		p Code
			<i>LP</i>	RGO FL	FL   3	4644
<b>11.</b> Pursuant te	o the provisions of Sections 607.0502	and 607.1508, Florida Statute	es, the above-named corp	poration submits this statement for the pu	rpose of changing its f	registered office.
or registers		da. Such ch <u>ang</u> e was aumonze	ed by the corporation's bo	pard of directors. I hereby accept the app	ionunient as registered	. ogo.it. i ci ii
or registers	h, and accept the obligations of, Sect	ion 607.0805, Porida Statutes.	ed by the corporation's bo	pard of directors. I hereby accept the app	14/0/	106
or registere familiar wit SIGNATURE <b>I</b>	h, and accept the obligations of, Sect	ion 607.0805, Pronda Statutes.	ed by the corporation's by  TE: Registered Agent signature requ	pard of directors. Thereby accept the app	$\frac{\sqrt{4/26}}{50000000000000000000000000000000000$	196
or registere familiar wit SIGNATURE <b>I</b>	h, and accept the obligations of, Section of the community of the section of the sec	and title if applicable (NO D DIRECTORS		pard of directors. Thereby accept the app	V4/26 / DATE TICERS AND DIRECTO	96 DRS IN 12
or registere familiar wit SIGNATURE	h, and accept the poligations of, Section of the property of t	and title if applicable (NO	TE: Registered Agort signature requ	pairs of directors. Thereby accept the application of directors application of the directors.	14/26 PORTE OF CHARGE	196
or registere familiar wit SIGNATURE 12.	h, and accept the poligations of, Section Community Signature, typed or printed name of registered agent OFFICERS AND P GAWRON, MARY	gon 607, 0605, Pronda Statutes.  and title if applicable (NO D DIRECTORS DELETE	TE: Registered Agort signature requ	pairs of directors. Thereby accept the application of directors application of the directors.	14/26 PORTE OF CHARGE	96 DRS IN 12
or registere familiar wit SIGNATURE 1.	h, and accept the poligations of, Section Community Signature, typed or printed name of registered agent OFFICERS ANI P GAWRON, MARY 9209 SEMINOLE BLVD UNIT	gon 607, 0605, Pronda Statutes.  and title if applicable (NO D DIRECTORS DELETE	TE: Registered Agort signature requ	pairs of directors. Thereby accept the application of directors application of the directors.	14/26 PORTE OF CHARGE	96 DRS IN 12
or registere familiar wit SIGNATURE 12.  112.  111LE NAME STREEL ADDRESS CITY-ST-ZIP	h, and accept the poligations of, Section Communication of Figure 1 agent OFFICERS AND GAWRON, MARY 9209 SEMINOLE BLVD UNIT SEMINOLE FL 34642	on 607 0605, Nonda Statutes.  and the rappicable (NO D DIRECTORS DELETE	TE: Registered Agort signature requirements  13.  1 1 TITLE  12 NAME  13 STREET ADDRESS  1.4 CITY-ST-ZIP	pairo of directors. Thereby accept the application of directors application of directors applications are discontinuous and directors.	J4/26 / PICERS AND DIRECTO Change (Change)	PS IN 12 Addition
or registers familiar wit SIGNATURE 1.  12.  HILE NAME SIREEI ADDRESS CITY-ST-ZIP TITLE	h, and accept the poligations of, Section Communication (Communication)  OFFICERS AND  GAWRON, MARY  9209 SEMINOLE BLVD UNIT  SEMINOLE FL 34642  V	gon 607, 0605, Pronda Statutes.  and title if applicable (NO D DIRECTORS DELETE	TE: Registered Agent signature requirements  13.  1 1 TITLE  12 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2 1 TITLE	pairs of directors. Thereby accept the application of directors application of the directors.	14/26 PORTE OF CHARGE	96 DRS IN 12
or registers familiar wit SIGNATURE 1.  12.  HILE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME	h, and accept the poligations of, Section Community  Signature, typed or printed name of registered agent  OFFICERS ANI  P GAWRON, MARY  9209 SEMINOLE BLVD UNIT  SEMINOLE FL 34642  V SWIRYDENKO, WANDA	on 607 0605, Nonda Statutes.  and the rappicable (NO D DIRECTORS DELETE	TE: Registered Agort signature required 13.  1 1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2 1 TITLE 22 NAME	pairs of directors. Thereby accept the application of directors application of the directors.	J4/26 / PICERS AND DIRECTO Change (Change)	PS IN 12 Addition
or registers familiar wit SIGNATURE 1.  112.  111LE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	h, and accept the poligations of, Section Community Signature, typed or printed name of registered agent OFFICERS ANI P GAWRON, MARY 9209 SEMINOLE BLVD UNIT SEMINOLE FL 34642 V SWIRYDENKO, WANDA 11665 SHARON DR.	on 607 0605, Nonda Statutes.  and the rappicable (NO D DIRECTORS DELETE	TE: Registered Aport signature requirements   13.   1 TITLE   12 NAME   1.3 STREET ADDRESS   1.4 CITY-ST-ZIP   2 TITLE   22 NAME   2.3 STREET ADDRESS	pairs of directors. Thereby accept the application of directors application of the directors.	J4/26 / PICERS AND DIRECTO Change (Change)	PS IN 12 Addition
or registers familiar wit SIGNATURE 1.  12.  HILE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME	h, and accept the poligations of, Section Community  Signature, typed or printed name of registered agent  OFFICERS ANI  P GAWRON, MARY  9209 SEMINOLE BLVD UNIT  SEMINOLE FL 34642  V SWIRYDENKO, WANDA	on 607 0605, Nonda Statutes.  and the rappicable (NO D DIRECTORS DELETE	TE: Registered Agort signature required 13.  1 1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2 1 TITLE 22 NAME	pairs of directors. Thereby accept the application of directors application of the directors.	J4/26 / PICERS AND DIRECTO Change (Change)	PS IN 12 Addition
or registers familiar wit SIGNATURE 1.  112.  111LE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP	h, and accept the poligations of, Section Community Signature, typed or printed name of registered agent OFFICERS ANI P GAWRON, MARY 9209 SEMINOLE BLVD UNIT SEMINOLE FL 34642 V SWIRYDENKO, WANDA 11665 SHARON DR.	on 607 0605, Nonda Statutes.  and the fappicable (NO D DIRECTORS DELETE	TE: Registered Aport signature required in the second app	pairs of directors. Thereby accept the application of directors application of the directors.	DATE DATE CONTROL Change	PS IN 12 Addition
or registers familiar wit SIGNATURE 1.  112.  HILLE NAME STREEL ADDRESS GITY-ST-ZIP HILLE NAME STREET ADDRESS GITY-ST-ZIP TITLE TITLE	h, and accept the poligations of, Section Community Signature, typed or printed name of registered agent OFFICERS ANI P GAWRON, MARY 9209 SEMINOLE BLVD UNIT SEMINOLE FL 34642 V SWIRYDENKO, WANDA 11665 SHARON DR.	on 607 0605, Nonda Statutes.  and the fappicable (NO D DIRECTORS DELETE	TE: Registered Aport signature requirements of the state	pairs of directors. Thereby accept the application of directors application of the directors.	DATE DATE CONTROL Change	PS IN 12 Addition
or registers familiar wit SIGNATURE 1.  112.  HILE NAME STREEL ADDRESS GITY-ST-ZIP HILE NAME STREET ADDRESS CITY-ST-ZIP TILLE NAME NAME	h, and accept the poligations of, Section Community Signature, typed or printed name of registered agent OFFICERS ANI P GAWRON, MARY 9209 SEMINOLE BLVD UNIT SEMINOLE FL 34642 V SWIRYDENKO, WANDA 11665 SHARON DR.	on 607.0805, Nonda Statutes.  and the Fappicable (NO D DIRECTORS DELETE  173  DELETE	TE: Registered Aport signature required in the second aport signature required in the second aport signature required in the second aport signature requirements in the second approximate requirements in the second appro	pairs of directors. Thereby accept the application of directors application of the directors.	DATE DATE CHANGE	PS IN 12 Addition Addition
or registers familiar wit SIGNATURE 1.  112.  HILE NAME STREEL ADDRESS GITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS	h, and accept the poligations of, Section Community Signature, typed or printed name of registered agent OFFICERS ANI P GAWRON, MARY 9209 SEMINOLE BLVD UNIT SEMINOLE FL 34642 V SWIRYDENKO, WANDA 11665 SHARON DR.	on 607 0605, Nonda Statutes.  and the fappicable (NO D DIRECTORS DELETE	TE. Registered Aport signature required in the second aport signature required in the second aport signature required in the second aport signature requirement in the second aport signature requirem	pairs of directors. Thereby accept the application of directors application of the directors.	DATE DATE CONTROL Change	PS IN 12 Addition Addition
Or registers familiar wit SIGNATURE 1.  112.  HILE NAME STREEL ADDRESS GITY-ST-ZIP TITLE NAME STREET ADDRESS GITY-ST-ZIP TITLE NAME STREET ADDRESS GITY-ST-ZIP TITLE NAME NAME NAME	h, and accept the poligations of, Section Community Signature, typed or printed name of registered agent OFFICERS ANI P GAWRON, MARY 9209 SEMINOLE BLVD UNIT SEMINOLE FL 34642 V SWIRYDENKO, WANDA 11665 SHARON DR.	on 607.0805, Nonda Statutes.  and the Fappicable (NO D DIRECTORS DELETE  173  DELETE	TE. Registered Aport signature req.  13.  1 1 TITLE  12 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2 1 TITLE  22 NAME  23 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  32 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  42 NAME	pairs of directors. Thereby accept the application of directors application of the directors.	DATE DATE CHANGE	Addition  Addition
Or registers familiar wit SIGNATURE 1.  112.  HILE NAME STREEL ADDRESS GITY-ST-ZIP TITLE NAME STREET ADDRESS	h, and accept the poligations of, Section Community Signature, typed or printed name of registered agent OFFICERS ANI P GAWRON, MARY 9209 SEMINOLE BLVD UNIT SEMINOLE FL 34642 V SWIRYDENKO, WANDA 11665 SHARON DR.	on 607.0805, Nonda Statutes.  and the Fappicable (NO D DIRECTORS DELETE  173  DELETE	TE. Registered Agort signature requests  13.  1 1 TITLE  12 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2 1 TITLE  22 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  32 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS	pairs of directors. Thereby accept the application of directors application of the directors.	DATE DATE CHANGE	Addition  Addition
Or registers familiar wit SIGNATURE 1.  112.  HILE NAME STREEL ADDRESS GITY-ST-ZIP	h, and accept the poligations of, Section Community Signature, typed or printed name of registered agent OFFICERS ANI P GAWRON, MARY 9209 SEMINOLE BLVD UNIT SEMINOLE FL 34642 V SWIRYDENKO, WANDA 11665 SHARON DR.	on 607.0805, Nonda Statutes.  and the Fanorcable (NO D DIRECTORS DELETE  173  DELETE  DELETE	TE. Registered Aport signature required in the second aport signature required in the second aport signature required in the second aport signature requirement in the second approximately signature requirement requirement in the second approximately signature requirement re	pairs of directors. Thereby accept the application of directors application of the directors.	DATE Change	Addition  Addition  Addition
Or registers familiar wit SIGNATURE 1.  112.  HILE NAME STREEL ADDRESS GITY-ST-ZIP TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE	h, and accept the poligations of, Section Community Signature, typed or printed name of registered agent OFFICERS ANI P GAWRON, MARY 9209 SEMINOLE BLVD UNIT SEMINOLE FL 34642 V SWIRYDENKO, WANDA 11665 SHARON DR.	on 607.0805, Nonda Statutes.  and the Fappicable (NO D DIRECTORS DELETE  173  DELETE	TE: Registered Agort signature requests  13.  1 1 TITLE  12 NAME  13 STREET ADDRESS  1.4 CITY-ST-ZIP  2 1 TITLE  22 NAME  23 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE	pairs of directors. Thereby accept the application of directors application of the directors.	DATE DATE CHANGE	Addition  Addition
Or registers familiar wit SIGNATURE 1.  112.  HILE NAME STREEL ADDRESS GITY-ST-ZIP TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME	h, and accept the poligations of, Section Community Signature, typed or printed name of registered agent OFFICERS ANI P GAWRON, MARY 9209 SEMINOLE BLVD UNIT SEMINOLE FL 34642 V SWIRYDENKO, WANDA 11665 SHARON DR.	on 607.0805, Nonda Statutes.  and the Fanorcable (NO D DIRECTORS DELETE  173  DELETE  DELETE	TE: Registered Agort signature requests  13.  1 1 TITLE  12 NAME  13 STREET ADDRESS  1.4 CITY-ST-ZIP  2 1 TITLE  22 NAME  23 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  32 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  42 NAME  43 STREET ADDRESS  4.1 CITY-ST-ZIP  5 1 TITLE  52 NAME	pairs of directors. Thereby accept the application of directors application of the directors.	DATE Change	Addition  Addition
Or registers familiar wit SIGNATURE 1  12. HILE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME STREEL ADDRESS	h, and accept the poligations of, Section Community Signature, typed or printed name of registered agent OFFICERS ANI P GAWRON, MARY 9209 SEMINOLE BLVD UNIT SEMINOLE FL 34642 V SWIRYDENKO, WANDA 11665 SHARON DR.	on 607.0805, Nonda Statutes.  and the Fanorcable (NO D DIRECTORS DELETE  173  DELETE  DELETE	TE: Registered Agort signature requests  13.  1 1 TITLE  12 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2 1 TITLE  22 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS	pairs of directors. Thereby accept the application of directors application of the directors.	DATE Change	Addition  Addition
Or registers familiar wit SIGNATURE 1.  112.  HILE NAME STREEL ADDRESS GITY-ST-ZIP TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME STREEL ADDRESS CITY-ST-ZIP	h, and accept the poligations of, Section Community Signature, typed or printed name of registered agent OFFICERS ANI P GAWRON, MARY 9209 SEMINOLE BLVD UNIT SEMINOLE FL 34642 V SWIRYDENKO, WANDA 11665 SHARON DR.	on 607.0805, Nonda Statutes.  and the Fanorcable (NO D DIRECTORS DELETE  173  DELETE  DELETE	TE: Registered Agort signature requests  13.  1 1 TITLE  12 NAME  13 STREET ADDRESS  1.4 CITY-ST-ZIP  2 1 TITLE  22 NAME  23 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  32 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  42 NAME  43 STREET ADDRESS  4.1 CITY-ST-ZIP  5 1 TITLE  52 NAME	pairs of directors. Thereby accept the application of directors application of the directors.	DATE Change	Addition  Addition
Or registers familiar wit SIGNATURE 1  12. HILE NAME STREEL ADDRESS CITY-ST-ZIP TITLE	And accept the poligations of, Section Commence of registered agent OFFICERS AND PROPERTY OFFICERS AND PROPERTY OFFICERS AND PROPERTY OFFICERS AND PROPERTY OF THE PROPERTY OF	on 607.0805, Nonda Statutes.  and the Pappicable (NO D DIRECTORS DELETE    173	TE. Registered Agort signature requests  13.  1 1 TITLE  12 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2 1 TITLE  22 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP	pairs of directors. Thereby accept the application of directors application of the directors.	DATE Change Change Change	Addition  Addition  Addition  Addition
Or registers familiar wit SIGNATURE 1.  112.  HILE NAME STREEL ADDRESS GITY-ST-ZIP TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME STREEL ADDRESS CITY-ST-ZIP	And accept the poligations of, Section Commence of registered agent OFFICERS AND PROPERTY OFFICERS AND PROPERTY OFFICERS AND PROPERTY OFFICERS AND PROPERTY OF THE PROPERTY OF	on 607.0805, Nonda Statutes.  and the Pappicable (NO D DIRECTORS DELETE    173	TE: Registered Agort signature requests  13.  1 1 TITLE  12 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2 1 TITLE  22 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP  6.1 TITLE	pairs of directors. Thereby accept the application of directors application of the directors.	DATE Change Change Change	Addition  Addition  Addition  Addition
Or registers familiar wit SIGNATURE J.  112.  1111.  NAME STREET ADDRESS GITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Name accept the poligations of, Section Comments  Signature, typed or prived hand of registered agent  OFFICERS AND  P GAWRON, MARY 9209 SEMINOLE BLVD UNIT SEMINOLE FL 34642  V SWIRYDENKO, WANDA 11665 SHARON DR. LARGO FL 34644	on 607.0805, Nonda Statutes.  and the Pappicable (NO D DIRECTORS DELETE    DELETE   DELETE     DELETE   DELETE	TE. Registered Agent signature req  13.  1 1 TITLE  12 NAME  13 STREET ADDRESS  1.4 CITY-ST-ZIP  2 1 TITLE  22 NAME  23 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  32 NAME  33 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  42 NAME  43 STREET ADDRESS  4.1 CITY-ST-ZIP  5.1 TITLE  52 NAME  53 STREET ADDRESS  4.1 CITY-ST-ZIP  5.1 TITLE  52 NAME  53 STREET ADDRESS  5.4 CITY-ST-ZIP  6.1 TITLE  62 NAME  63 STREET ADDRESS  6.4 CITY-ST-ZIP  6.1 TITLE  62 NAME  63 STREET ADDRESS  6.4 CITY-ST-ZIP	pairs of directors. Thereby accept the application of directors application of the directors.	DATE Change Change Change	Addition  Addition  Addition  Addition

4/26/96 593-2800