## 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 DOCUMENT #

P94000014280 (9)

RELIABLE MAINTENANCE SERVICE, INC.

Principal Place	√R ismose	Mailing Address					
Principal Place of Business 1723 SMITH STREET ORANGE PARK FL 32073		1723 SMITH STREET ORANGE PARK FL 32073					
					3. Date Incorporated or Qualified 02/22/1994	3a. Date of Last 02/08/	•
2. Principal Plac	ce of Business	2a. Mailing Address			4. FEI Number		Apolied For
21   Suite, Apt. #, etc.		<b>26</b>	Suite, Apt. #, etc.		59-3218317	\$8.7	Not Applicable  5 Additional
22		27	••• <sub>1</sub>		5. Certificate of Status Desired	1 1	e Required
City & State		City & State			Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip Country 25		7ip Country <b>30</b>		8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ☐ Yes ☐ No			
· · · · · · · · · · · · · · · · · · ·	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New F	egistered Agent	
001075			81	Name			
	LLO, JAMES D JR. MITH STREET		82		ddress (P.O. Box Number is Not Acceptable)		
	E PARK FL 32073		83				
			84	City		<b></b> 85	Zip Code
					poration submits this statement for the pur	FL [ ]	
SIGNATURE	i, and accept the obligations of, Sections of Sections	and stord are ocasile (NOT	E Registered Ages 13. 1 1 TITLE 12 NAME	il signature rock	ared when reinstating. ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIRECT	
STREET ADDRESS	1723 SMITH STREET ORANGE PARK FL 32073		13 STREET				
PHI	D	DELETE	2 1 TITLE	1-21		Change	e 🔲 Addition
NAM:	CRISTELLO, JAMES D JR.		2 2 NAME				
STREST ADDRESS	1723 SMITH STREET		2.3 STREET				
City-S1-202	ORANGE PARK FL 32073	DELETE	2 4 CITY - S 3 1 TITLE	T - 21P	<del> </del>	Change	e
NAME			3.2 NAME				
STREET ADDRESS			33 STREE	I ADDRESS			
C IY - S <sup>2</sup> - Zi <sup>2</sup>			3.4 C(TY - 5	T-2IP			
11°LE		DEFEIE	4 1 TITLE	1		Change	e
NAME SUPELLADURESS			4.2 NAME 4.3 STREET	ADDRESS			
COLY ST-ZIP			4.5 STILLET				
THUE		☐ DELFTE	5 1 TITLE			☐ Chang	je 🔲 Addition
NAME			5.2 NAME				
STREET ADDRESS			53 STREET	ADDRESS			
CITY ST ZIE			54 CiTy - 5	1 - ZIP			
TOBLE	DELETE		6 1 THEF		Change Addit		ge [ Addition
NAME:			6.2 NAME				
STREET ADDRESS			6 3 STREE				
01Y-\$1-ZP 14 Eric hereb	certify that the information supplied	with this film is unfortarily form	64 CITY-5		fy for the exemption stated in Section 119	107(3)(k) Florida Sta	dutes I forther
certify that oath; that I	the information indicated on this annu	ual report or supplemental annu- ration or the receiver or trusted	ual report is tri e empowered	in and acci	urate and that my signature shall have the this report as required by Chapter 607, F	s same legal effect as	s if made under

**SIGNATURE:** 

TAQUEE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR PRINTED TO

1-22-96 (904)264-7086

R2E034 (12/95)