## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # P94000014280					01-27-1999 90045 017 ***150.00		
1. Corporation Name .  RELIABLE MAINTENANCE SERVICE, INC.							
HELIADE	E MAINTENANCE OFFICE,	1110-	•				
Principal Place of Business Mailing Address						11E1 01418 11E01 1	1011 0211 1001
1723 SMITH STREET 1723 SMITH STR ORANGE PARK FL 32073 ORANGE PARK I					DO NOT WRITE IN THIS	SPACE	
					3. Date incorporated or Qualifed		
					02/22/1994		
	lace of Business	2a. Mailing Address			4. FEI Number	<del></del>	plied For
21	-	26			59-3218317		t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	<b>\$8.75</b> A Fee Red	
City & Stat	e	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 to	
Zip	Country	28	Country		•		rees
24			10		This corporation owes the current year Interpretation     Personal Property Tax.		□No
9. Name and Address of Current Registered Agent				•	10. Name and Address of New Registered Agent		
				Name		<del></del>	
CRISTELLO, JAMES D JR. 1723 SMITH STREET			82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
ORANGE PARK FL 32073						<u> </u>	121 FB . 31
ORANGE PARK LE 32073			83				
	• •		84 (	City	<b>-</b>	85 Zip C	ode
	40-4				FL.		
office or r	egistered agent, or both, in the State of	of Florida. Such change was aut	horized by the	amed corpo a corporation	pration submits this statement for the purpose of in's board of directors. I hereby accept the appoin	changing its i ntment as rec	jistered
agent. 1 a	m familiar with, and accept the obligation	ions of, Section 607.0505, Florid	da Statutes.				
SIGNATURE	Signature, typed or printed name or registered agent	Manufe if applicable (NOTE: R	legistered Agent si	nature required	(when reinstating) DATE		
12.	OFFICERS AND		13.	J	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	RS IN 12
TITLE	D.	☐ DELETE	1.1 TITLE			Change	☐ Addition
NAME	CRISTELLO, JAMES D SR.		1.2 NAME		:		
STREET ADDRESS	1723 SMITH STREET		1.3 STREET AD	ORESS	•		
CITY-ST-ZIP	ORANGE PARK FL 32073		1.4 CITY-ST-Z	P	•		
TITLE	D	☐ DELETE	2.1 TITLE			☐ Change	Addition
NAME	CRISTELLO, JAMES D JR.		2.2 NAME				
STREET ADDRESS	1723 SMITH STREET		2.3 STREET AD	DRESS	•		
CITY-ST-ZIP	ORANGE PARK FL 32073		2. 4 CITY-ST-Z	IP			
TITLE .		DELETE	3.1 TITLE			Change	· 🔲 Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET AD	DRESS			
CITY-ST-ZIP			3.4. CITY-ST-Z	IP			
TITLE		☐ DELETE	4.1 TITLE		6	Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS	•		4.3 STREET AD	ORESS			ļ
CITY-ST-ZIP			4.4 CITY-ST-ZI	Р			
TITLE	74.	☐ DELETE	5.1 TITLE		•	☐ Change	☐ Addition
NAME			5.2 NAME		• •		
STREET ADDRESS	,		5.3 STREET AD	DRESS			

CITY-ST-ZIP, 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

5.4 CITY-ST-ZIP

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

**FILED** 

Jan 27, 1999 8:00am

**Secretary of State** 

Addition

Change