## 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 #

1. Corporation Name

LIANC MAINTENANCE INC

## **FILED** Apr 01, 1999 8:00 am Secretary of State

04-01-1999 90105 045 \*\*\*150.00

M GMAN	IAINTENANCE, INC.				
Principal Plac	e of Business	Mailing Address			Arbeit Bibli Gelte Bigir geber brate iffer
3771 KINGSTON BLVD. 3771 KINGSTON BLVD.			•		
SARASOTA FL 34238 SARASOTA FL 34238				DO NOT WRITE IN THIS SPACE	
	•			3. Date Incorporated or Qualifed	1110 01 7102
				03/22/1991	
2. Principal Place of Business 2a. Mailing Address				4. FEI Number	Applied For
		26		59-3060459	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	_	5. Certifcate of Status Desired	\$8.75 Additional Fee Required
City & Stat	<u> </u>	City & State	<u> </u>	6. Election Campaign Financing	\$5.00 May Be
23	••	28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current ye	ear Intangible
24	25	29	30	Personal Property Tax.	No
	9. Name and Address of Cu	rrent Registered Agent		10. Name and Address of New Regist	ered Agent
			81 Name		
DUMBAUGH, JOHN D. ,			82 Street Add	ress (P.O. Box Number is Not Acceptable)	<del>-</del> -
1900 RINGLING BLVD.			02 Olleet Add	ress (r.o. box rumber is not resortable)	
SARASOTA FL 34236			83		<del>-</del>
			04 07		85 Zip Code
			84 City		FL 85 Zip Code
agent. I a SIGNATURE	am familiar with, and accept the ol		rida Statutes.  Registered Agent signature require	poration submits this statement for the purpo on's board of directors. I hereby accept the ad when reinstating)	NTE
12.	OFFICERS	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	
TITLE ,	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME .	BUCKEN, HANS H.		1.2 NAME	•	
STREET ADDRESS	3771 KINGSTON BLVD.		1.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	BUCKEN, KLAUS D.		2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CiTY-ST-ZIP	SARASOTA FL		2. 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change   ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS	. ~ ~	بسوا ليمه لما الماليجية والامار	3.3 STREET ADDRESS ~	And the second of the second o	
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP	]	•	4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP	at the straight of the straight		5.4 CITY-ST-ZIP	to got the original to great	Post in the second of the seco

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.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

HAIGNATURBEEQUIRED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ DELETE

☐ Change

Addition