FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR -6 AM 10:03

DOCUMENT # **P16217** **(2)**

1. Corporation Name
ISS CLEANING SERVICES GROUP, INC.

Principal Place of Business	Mailing Address
375 HUDSON ST NEW YORK NY 10014-0658	375 HUDSON ST NEW YORK NY 10014-0658

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: **10/01/1987**
3a. Date of Last Report: **08/09/1994**

2. Principal Place of Business — 21:
2a. Mailing Address — 26:
Suite, Apt. #, etc. — 22:
Suite, Apt. #, etc. — 27:
City & State — 23:
City & State — 28:
Zip — 24: Country — 25:
Zip — 29: Country — 30:

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

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PCEO	1.1 TITLE	PRESIDENT & CEO	☒ Change ☒ Addition
NAME	SLIPSAGER, HENRIK	1.2 NAME	DENNIS J. SPINA	
STREET ADDRESS	8 W. 65TH ST.	1.3 STREET ADDRESS	8 STONE HOUSE ROAD	
CITY-ST-ZIP	NEW YORK NY	1.4 CITY-ST-ZIP	CALIFON, NEW JERSEY 07830	
TITLE	VP	2.1 TITLE		☐ Change ☐ Addition
NAME	DUDAS, MICHAEL	2.2 NAME		
STREET ADDRESS	299 WILLOW WAY	2.3 STREET ADDRESS		
CITY-ST-ZIP	CLARK NJ	2.4 CITY-ST-ZIP		
TITLE	VPS	3.1 TITLE		☐ Change ☐ Addition
NAME	ATKINS, ROBERT E JR.	3.2 NAME		
STREET ADDRESS	22 PARKSIDE DR.	3.3 STREET ADDRESS		
CITY-ST-ZIP	GREAT NECK NY	3.4 CITY-ST-ZIP		
TITLE	AS	4.1 TITLE		☐ Change ☐ Addition
NAME	JACOVETTI, FRANK	4.2 NAME		
STREET ADDRESS	1540 E. 36TH ST.	4.3 STREET ADDRESS		
CITY-ST-ZIP	BROOKLYN NY	4.4 CITY-ST-ZIP		
TITLE	VP	5.1 TITLE	VICE PRESIDENT	☒ Change ☒ Addition
NAME	CARROLL, ROBERT J	5.2 NAME	MARTIN MC DONOUGH	
STREET ADDRESS	P. O. BOX 533 N/A, 6 HOYT RD.	5.3 STREET ADDRESS	172 ASPEN STREET	
CITY-ST-ZIP	PT. RIDGE NY	5.4 CITY-ST-ZIP	FLORAL PARK, N.Y. 11001	
TITLE	VP	6.1 TITLE		☐ Change ☐ Addition
NAME	STABILE, ROBERT C	6.2 NAME		
STREET ADDRESS	3 GUTHRIE CT.	6.3 STREET ADDRESS		
CITY-ST-ZIP	E. NORTHPORT NY	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 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.

SIGNATURE: _____ ASSISTANT SECRETARY 3/29/95 212-229-4000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — Daytime Phone #

000370Y FP