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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

**FILED** Jan 28 1998 8:00am Secretary of State

| DOCUMENT # F41675 (2)  ALL CLEANING SERVICES, INC.   |  |   |                  |   |  |                            |
|--|--|---|------------------|---|--|----------------------------|
| Principal Place of Business Mailing Address  |  |   |                  |   |  |                            |
| •  |  |   |                  |   |  |                            |
| % JAMES DALY 4331 NE 4TH AVENUE 90 BOX 431   |  |   |                  |   |  |                            |
| BOCA RATON FL 33431-5003 BOCA RATON FL 33429-0431  |  |   |                  |   | DO NOT WRITE IN THIS SPACE                             |                            |
| US   |  |   |                  |   | 3. Date Incorporated or Qualified                      |                            |
|  |  | - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 |                  | <del></del> .   | 08/24/1981   | , -,                       |
| · ·  | tace of Business                                     | 2a. Mailing Address                     |                  |   | 4. FEI Number  | Applied For                |
| 21 Suite Ant   | # etc  | Suite, Apt. #, etc.                     |                  |   | 59-2119837   | Not Applicable             |
| Suite, Apt. #, etc.  |  | <u> </u>                                | 27               |   | 5. Certificate of Status Desired                       | Fee Required               |
| City & State   |  | City & State                            |                  |   | 6. Election Campaign Financing                         | \$5.00 May Be              |
| 23   |  | 28                                      |                  |   | Trust Fund Contribution                                | Added to Fees              |
| Zip  | Country  | Zip                                     | Count            | ry  | 8. This corporation owes or has paid the cur           | rent year Intangible       |
| 24   | 25 29 30   |   | 30               | Personal Property Tax due June 30. Yes No             |  |                            |
| Name and Address of Current Registered Agent   |  |   |                  |   | 10. Name and Address of New Registered                 | Agent                      |
| DALY, JAMES  |  |   | a                | 81 Name   |  |                            |
| 4331 NE 4TH AVENUE   |  |   | 8                | 82 Street Address (P.O. Box Number is Not Acceptable) |  |                            |
| BO   | CA RATON FL  |   | _                |   |  |                            |
|  |  |   | 8                | 3   |  |                            |
|  |  |   | 8                | 4 City  | FL   | 85 Zip Code                |
| 11 Pursuant  | to the provisions of Sections 607 0502               | 2 and 607 1508. Florida Statu           | tes the ahr      | we-named co   |  | changing its registered    |
| 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 reg 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 regis agent. I am familiar with, and adopt the obligations of, Section 607.0505, Florida Statutes. |  |   |                  |   |  |                            |
|  | m rammar with, and addept the obliga                 | tions of, Section 607.0505, Fi          | orida Statut     | es.   | 1/2.1  | /a c                       |
| SIGNATURE  | Signature, typed or printed (any) of registered ager | nt and title are sable. (NO             | TE. Registered A | gent signalure regu                                   | ulred when reinstating) DATE                           | 70                         |
| 12.  | OFFICERS AND   |   | 13.              |   | ADDITIONS/CHANGES TO OFFICERS AND                      | DIRECTORS IN 12            |
| TITLE  | DVP DELETE 1.11                                      |   | 1.1 TITLE        |   |  | Change Addition            |
| NAME (   | DALY, JAMES 12N                                      |   | 1.2 NAM          | Ε   | **.  | (;                         |
| STREET ADDRESS   |  |   | 1.3 STRE         | ET ADDRESS  | -  | li li                      |
| CITY-ST-ZIP  | BOCA RATON FL 1.40                                   |   | 1,4 CiTY         | -ST-ZIP   |  |                            |
| TITLE  | DELETE 2.1 T   |   | 2,1 TITLE        |   |  | ☐ Change ☐ Addition        |
| NAME   | 2.2.1  |   | 2,2 NAM          | E   |  |                            |
| STREET ADDRESS   | s 235  |   | 2.3 STRE         | ET ADDRESS  |  |                            |
| CITY - ST - ZIP  | - ZIP  |   | 2. 4 CITY        | -ST-ZIP   |  |                            |
| TITLE  | DELETE 3,1 1   |   | 3.1 TITLE        |   |  | ☐ Change ☐ Addition        |
| NAME   | 3.21   |   | 3.2 NAM          | E   |  |                            |
| STREET ADDRESS   |  | •                                       | 3.3 STRE         | ET ADDRESS  |  |                            |
| CITY-ST-ZIP  |  |   |                  | -ST-ZIP   |  |                            |
| TITLE  |  | ☐ DELETE                                | 4.1 TITLE        | I .   |  | Change Addition            |
| NAME   |  |   | 4. 2 NAM         | E   |  |                            |
| STREET ADORESS   |  |   | 4.3 STRE         | ET ADDRESS  |  |                            |
| CITY - ST - ZIP  |  |   | 4,4 CITY         | -ST-ZIP   |  |                            |
| TITLE  | DELETE 5.1 TI  |   | 5.1 TITLE        |   |  | ☐ Change ☐ Addition        |
| NAME   | . 5.2 N  |   | 5.2 NAMI         | E   |  |                            |
| STREET ADDRESS   | DORESS 5.3 S   |   | 5.3 STRE         | ET ADDRESS  |  |                            |
| CITY - ST - ZIP  |  |   | 5,4 CITY         | -ST-ZIP   |  |                            |
| TITLE  |  |   | 6.1 TITLE        |   |  | Change Addition            |
| NAME   |  |   | 6.2 NAM          | Ε   |  |                            |
| STREET ADDRESS   |  |   | 6.3 STRE         | ET ADDRESS  |  |                            |
| CITY-ST-ZIP  |  |   | 6.4 CITY         | -ST-21P   |  |                            |
| 14. I hereby c   | ertify that the information supplied wil             | th this filing does not qualify f       | or the exem      | ption stated in                                       | n Section 119.07(3)(i), Florida Statutes. I further ce | rtify that the information |

indicated on this arriught 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.