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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P97000005338 (3)**1. Corporation Name

GENIE STEAM CLEAN, INC Principal Place of Business Mailing Address 4200 LENOX AVENUE 4200 LENOX AVENUE JACKSONVILLE FL 32205 JACKSONVILLE FL 32205 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/13/1997 2. Principal Place of Business 2a. Mailing Address 4, FEI Number Applied For 4741 Allantic Blvd. 21 4741 Atlantic Blud 45.0723285 Not Applicable Suite, Apt. #, etc. Suite, Apl. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 JACKSONVILL JACKSONVILLE FO 28 Trust Fund Contribution Added to Fees Country Zio Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 30 USA USA 32207 Personal Property Tax due June 30. 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 WILSON, JOHN 2728 GREEN STREET 82 Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 82205 83 84 City 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, 1 am and accept the obligations of, Section 607.0505, Florida Statutes. 1/14/98 PRESIDENT SIGNATURE ired when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CR2E034 (10/97 13. DELETE Change Addition TITLE PRESIDENT 1.1 TITLE NAME JOHN E. WILSON 12 NAME 1.3 STREET ADDRESS STREET ADDRESS 2728 BLAN ST FI 32205 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST- ZIP DELETE Change TITLE 3.1 TITLE Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS

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.

3.4. CITY - ST - ZIP

4.3 STREET ADDRESS

5.3 STREET ADDRESS

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5.4 CITY - ST - ZIP

4.4 CITY-ST-ZIP

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**FILED** 

Feb 02 1998 8:00am

Secretary of State

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