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 # P97000026413 (9)

AIR DUCT DECONTAMINATION, INC.

FILED Feb 03 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						a habriber its rein raski gabli ballit abnit abrit artif allen ittli fatt	
6120 SW 415			6120 SW 41ST COURT DAVIE FL 33314				
DAVIE FL 33	314	DAVIE FL 333				DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified	
					=	03/25/1997	
· ·	Place of Business	2a. Mailing Ad	dress			4. FEI Number Applied For	
21 Subs Ant # 210		26				65 - 0746717. Not Applicable	
Suite, Apt. #, etc.		├ ─┐	Suite, Apt. #, etc.			5. Certificate of Status Desired See Required	
City & Stat	<u> </u>	City & Stat	City & State				
23		28	h			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip Country		Zip				This corporation owes or has paid the current year Intangible	
24	25	29				Personal Property Tax due June 30. Yes No	
	9. Name and Address of Curr	ent Registered Agen		T.		10. Name and Address of New Registered Agent	
	VORE, JAMES			81	Name		
	20 SW 41ST COURT			82	Street Add	dress (P.O. Box Number is Not Acceptable)	
DA	ME FL 33314			200			
				83			
				84	City	85 Zip Code	
11 Pureuani	to the provisions of Continue 607.0	502 and 607 1508 Ela	rida Statutos tho	ahow	a-named cor	rporation submits this statement for the purpose of changing its registered	
office or r	registered agent, or both, in the Sta	ate of Florida. Such cha	ange was authoriz	ed by	the corpora	ation's board of directors. I hereby accept the appointment as registered	
	ım familiar with, and accept the ob	nyations of, Section 60	v.ubub, Florida St	สเปเอร	5 .		
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable	(NOTE Registe	red Ago	ent signature requ	ulired when reinstating) DATE	
12.		AND DIRECTORS	13			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD		DELETE 1.1	TITLE		☐ Change ☐ Addition	
NAME	DEVORE, JAMES		1.2	NAME	İ		
STREET ADDRESS	6120 SW 41ST COURT				ADDRESS		
CITY-ST-ZIP	DAVIE FL 33314			CITY-S	T · ZIP		
TITLE		Ш		TITLE		☐ Change ☐ Addition	
NAME				NAME	4Babras	•	
STREET ADDRESS					ADORESS		
CITY-ST-ZIP TITLE				TITLE	SI-ZIP	Change Addition	
NAME				NAME	ĺ	Constigue C Applicati	
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP			1	. CITY-S	1		
TITLE				TITLE		Change Addition	
NAME				NAME		· · · ·	
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP	_			CITY-S	i		
TITLE				TITLE		Change Addition	
NAME			5.2	NAME	}		
STREET ADDRESS			5.3	STREET	ADDRESS		
CITY-ST-ZIP			5.4	CITY-S1	T-ZIP		
TIFLE				TITLE		☐ Change ☐ Addition	
NAME	•		6.2	NAME			
STREET ADDRESS	,		6.3	STREET	ADDRESS		
CITY-ST-7IP			64	CITY - ST	T-71P		

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 13 if changed, or on an attachment with an address.