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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Jan 21 1997 8:00am

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Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 350190

(5)

**CLEAR-VIEW CLEANING CONTRACTORS INC** 

Principal Place 118 49TH STRI ST PETERSBUR	EET SOUTH		Mailing Address 118 49TH STREET SOUTH ST PETERSBURG FL 33707-1924						
						3. Date incorporated or Qualified 07/31/1969	3a. Date of Las 05/01/1996		
2. Principal Pl	lace of Business	2a. Mailing Address 26				4. FEI Number Applied For 59-1286323 Not Applicable			
Suite, Apt.	#, etc	Suite Apt. #, etc.				5. Certificate of Status Desired	1 1 7 7	5 Additional Required	
City & State		City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip <b>24</b>	Country   Zip   Country   Zip   30			ntry		8. This corporation has liability for intangible tax under s. 199,032, Florida Statutes			
	9. Name and Address of Cu	urrent Registered Agent		241		10. Name and Address of New Rec	Istered Agent		
	, WALTER A.			81 Name	:				
118 49 STREET, SOUTH ST. PETERSBURG FL 33707					Addres	ddress (P.O. Box Number is Not Acceptable)			
				83					
				84 City			FL	Zip Code	
office or re	egistered agent, or both in the S	7.0502 and 607.1508, Florida Sta State of Frorida, Such change wa obligations of, Section 607.0505,	is authorize	d by the cor	1 corpo rporatio	oration submits this statement for the pu on's board of directors. I hereby accep	urpose of changir the appointment	ig its registered : as registered	
SIGNATURE	<b></b>								
12.	Signature Typod or ponted hand of legisters App. 17 E. 17 E. 18	oragentano libert applicable (N SIAND DIRECTORS	IOTE: Registere	1 Agent signatur	e required	d when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE FRS AND DIRECT	TORS IN 12	
TOLE	PSO	DELETE	1171		T	ADDITIONAJONANGES TO OFFIC	Chan		
NAME	HILL, WALTER A.	L. DECEIL	1.2 N				الماري الماري	ge	
	118 49 STREET, SOUTH								
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STREET ADDRESS			- 6	REET ADDRESS					
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NAME			3.2 N						
STREET ADDRESS				REET ADDRESS					
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STREET ACCRESS				REET ADDRESS				ł	
CITY-ST-ZIP	***************************************	DELETE		TY-ST-ZIP			Chan	ge Addition	
TITLE		T nerere	6.1 TI				L. Chan	Se F" VOCITION	
NAME			6.2 N						
STREET ADDRESS			6.3 S	REET ADDRESS	1				

SIGNATURE: WALTER AND VERTICAL AND VERTICAL

appears in Block 12 or Block 13 if chariged or on an attachment with an address

64 CITY-ST-ZIP

14. I do 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