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Apr 02 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # **402110** (1)
1. Corporation Name
ADVANCED PRESSURE CLEANING OF FLORIDA, INC.

Principal Place of Business
**3735-B SHARES PLACE
RIVIERA BEACH FL 33404-1701
US**

Mailing Address
**3735-B SHARES PLACE
RIVIERA BEACH FL 33404-1701
US**



DO NOT WRITE IN THIS SPACE

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

3. Date Incorporated or Qualified 05/31/1972	
4. FEI Number 59-1395787	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**CORNWELL, CHARLES C.
3735 B. SHARES PLACE
RIVIERA BEACH FL 33404**

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	
NAME	CORNWELL, CHARLES C.	1.2 NAME	
STREET ADDRESS	3735 SHARES PLACE	1.3 STREET ADDRESS	
CITY-ST-ZIP	RIVIERA BEACH FL	1.4 CITY-ST-ZIP	
TITLE	VSD	2.1 TITLE	
NAME	GREEN, ERIC	2.2 NAME	
STREET ADDRESS	15189 SCOTT PLACE	2.3 STREET ADDRESS	
CITY-ST-ZIP	LOXAHATCHEE FL	2.4 CITY-ST-ZIP	
TITLE	ST	3.1 TITLE	
NAME	STEARNS, JACK L. JR.	3.2 NAME	
STREET ADDRESS	7324 73RD WAY	3.3 STREET ADDRESS	
CITY-ST-ZIP	WPB FL	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 supplementary 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 majority shareholder, 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 in an attachment with an address.

SIGNATURE:

[Signature] **Charles C. Cornwell**

3.19.98

561 815-0123

CR2E034 (10/97)