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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 414268

| 1. Corporation | TO COAST JANITOR SERVI | CE, INC. | | | | | |
|---|---|---|--|-------------------|--|--|------------------------|
| Principal Place | e of Business | Mailing Address | | | | fi dibil dibil dibil bi | eli dibili idel |
| 10585 20TH STREET 10585 20TH STREET | | | | | \ | | |
| VERO BEACH FL 32966 VERO BEACH FL 32966 | | | | | DO NOT WRITE IN THIS SPACE | | |
| | | | | | | IIS SPACE | _ |
| | | | | | 3. Date Incorporated or Qualifed 12/07/1972 | | · |
| 2. Principal Place of Business 2a. Mailing Addr | | | šS | | 4. FEI Number | <u> </u> | plied For |
| 21 | | 26 | No. 2 and Grant Control of the Contr | | 59-1439182 | | Applicable |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | Strite, Apt. #, etc. | | 5. Certificate of Status Desired | \$8.75 A | |
| 22 City 8 Stat | | City & State | | | C. Flastica Compaign Financing | \$5.00 | |
| City & State | e | 28 | | | 6. Election Campaign Financing Trust Fund Contribution | Added to | |
| 23 Zip | Country | Zip | Country | , | This corporation owes the current year | | |
| 24 | 25 | _ h | 30 | | Personal Property Tax. | | □No |
| | 9. Name and Address of Curren | | | | 10. Name and Address of New Registere | ed Agent | |
| DRIG | IGER, HENRY A., SR. | | 81 | | | | |
| 10585 20TH STREET | | | 82 | Street Ac | ddress (P.O. Box Number is Not Acceptable) | | |
| VER | D BEACH FL 32966 | | 83 | | | | |
| | | 1. A. | . | | | . 85 Zip C | ;odo |
| | | to the second | 84 | City | · · · · F | 85 Zip C | ,ode / |
| office or o | to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga | of Florida. Such change was aut | thorized by | the corpora | orporation submits this statement for the purpose ation's board of directors. I hereby accept the ap | of changing its of changing its of continuent as reg | registered pistered |
| SIGNATORE | Signature, typed or printed name of registered ager | it and title if applicable. (NOTE: F | | nt signature requ | uired when reinstating) DATE | | |
| 12. | | D DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFFICERS | | |
| TITLE | Process were a co | ☐ DELETE | 1.1 TITLE | 1 | | Change | ☐ Addition |
| NAME | DRIGGERS, HENRY A SR. | | 1.2 NAME | İ | | |) |
| STREET ADDRESS | 10585 20TH ST. | | 1.3 STREE | † ADDRESS | | | |
| CITY-ST-ZIP | VERO BEACH FL 32966 | | 1.4 CITY-S | T-ZIP | | | Addition |
| TITLE | | ☐ DELETE | 2.1 TITLE | · | <u> </u> | Change | |
| NAME | | | 2.2 NAME | | | | 1 |
| STREET ADDRESS | | | | TADDRESS | | | - |
| CITY-ST-ZIP | | ☐ DELETE | 2.4 CITY-5 | ST-ZIP | | ☐ Change | Addition |
| TITLE | | C) Delete | 3.1 TITLE | 1 | | onlingo | |
| NAME | | | 3.2 NAME | | | | } |
| STREET ADDRESS | | | | TADDRESS | | | Í |
| CITY-ST-ZIP | | ☐ DELETE | 3.4. CITY-5 | 51-ZIP | | Change | ☐ Addition |
| TITLE | } | T pereir | 1 | } | | | |
| NAME | | | 4. 2 NAME | | | | |
| STREET ADDRESS | | | | T ADDRESS | | | ļ |
| CITY-ST-ZIP TITLE | | □ DELETE | 4.4 CITY-S 5.1 TITLE | 11-212 | | Change | Addition) |
| | | | 5.1 NAME | | | _ · • | |
| NAME | | | | T ADDRESS | | | |
| STREET ADDRESS | | | 5.4 CITY-S | | | | į |
| CITY-ST-ZIP | | ☐ DELETE | 6.1 TITLE | | | ☐ Change | Addition |

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 change it, or on an attachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

Daytime Phone #