

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

**PROFIT
CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 JUL -3 AM 9:09

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # 564192 (3)

1. Corporation Name

COMMERCIAL MAINTENANCE INDUSTRIES, INC.

Principal Place of Business

Mailing Address

3140 VIRGINIA ST.
 COCONUT GROVE FL 33133

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 COCONUT GROVE FL 33133

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 12/06/1977	3a. Date of Last Report 10/05/1994
4. FEI Number 59-1779243	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Exemption from Annual Report ☐ \$5.00 May Be Added to Fees	
7. This corporation has not filed for bankruptcy under 11 U.S.C. 101, Florida Statutes ☒ Yes ☐ No	

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	Zip
24	30
Country	Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CHILDERS, JACK
 13301 S.W. 232ND ST.
 MIAMI FL 33170**

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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 _____ DATE _____
 (Signature of person or firm to be registered agent and the corporation's registered agent signature required after registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONAL OFFICERS AND DIRECTORS	
TITLE	PC	1.1 TITLE	☐ Change ☐ Addition
NAME	CHILDERS, JACK	1.2 NAME	
STREET ADDRESS	13301 S W 232ND ST	1.3 STREET ADDRESS	
CITY, ST, ZIP	MIAMI, FL 00000	1.4 CITY, ST, ZIP	
TITLE	GP	2.1 TITLE	☐ Change ☐ Addition
NAME	GREENE, USA 1	2.2 NAME	
STREET ADDRESS	13650 S.W. 192 STREET	2.3 STREET ADDRESS	
CITY, ST, ZIP	MIAMI FL 33177	2.4 CITY, ST, ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY, ST, ZIP		3.4 CITY, ST, ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY, ST, ZIP		4.4 CITY, ST, ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY, ST, ZIP		5.4 CITY, ST, ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY, ST, ZIP		6.4 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(b)(6), 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 2 or Block 13 if applicable, or in an attachment with an address.

SIGNATURE: *Jack Childers, President* **June 28, 1995 (305) 258-0590**
 SIGNATURE AND TYPED OR PRINTED NAME OF HOLDING OFFICER OR DIRECTOR

CR2E034(3-95)