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

PROFIT CORPORATION ANNUAL REPORT

1998

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SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 572283

(0)

ALEX JANITOR INDUSTRIAL SUPPLY CORP.

Principal Place of Business Mailing Address
1553 N.W. 28TH STREET 1553 N.W. 28TH STREET

FILED Mar 04 1998 8:00am Secretary of State



MIAMI FL 33142		MIAMI FL 33142			DO NOT WRITE IN TH	IC CDACE	
					DO NOT WRITE IN THI 3. Date Incorporated or Qualified	S SPACE	
					05/09/1978		
Principal Pla	ace of Business	2a, Mailing Address			4. FEI Number		nolled For
7 Thicipal Flace of Business		26			59-1920862		Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
		27			5. Certificate of Status Desired		
City & State		City & State			6. Election Campaign Financing		May Be
Zip	Country	Zip Zip	-T-C	untry	Trust Fund Contribution		to Fees
٦.	25			Jilly	8. This corporation owes or has paid the o		ntangible No
<u> </u>	9. Name and Address of Curre	29 ant Registered Agent	30	1	Personal Property Tax due June 30. 10. Name and Address of New Registers		
TEI		THE CONTROL PAGE IN		81 Name	10, traine and Addison of How Hogistals	D POOL	
TELLEZ, JOSE A							
	5 W. FLAGLER ST.			82 Street Ad	dress (P.O. Box Number is Not Acceptable)		
MIA	MI FL 33134			83			
				9-3			
				84 City		85 Zip	Code
					F		<u> </u>
	Signature, typed or printed name of registered as	· · · · · · · · · · · · · · · · · · ·			quired when reinstating) DATE		
<u>2. </u>	OFFICERS AF	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A		
TLE	P	DELETE	1.1 T	ITLE		Change	Addition
AME	TELLEZ, JOSE A.		1.2 8	NAME			
TREET ADDRESS	9405 W. FLAGLER ST.		1.3 5	STREET ADDRESS			-
TY-ST-Z#	MIAMI FL		1.4 (CITY-ST-ZIP			
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MME				NAME			
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AME				LAME			
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AME		C Diffir		NAME		onenge	THE PERSONNEL
TREET ADDRESS				STREET ADDRESS			
				I .			
ITY-ST-ZIP	ertify that the information supplied	with this bling does not quali		remotion stated	in Section 119.07(3)(i), Florida Statutes. I further	certify that #	e information
indicated of officer or o	on this annual report or supplemen	ntal annual report is true and oceiver or trustee empowered tachment with an address.	accurate ar I to execute	nd that my signa	sture shall have the same legal effect as if made equired by Chapter 607, Florida Statutes; and the	under oath; ti	hat I am an