FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

MENT # **F68929**

(1)

DOCUMENT #

E & M CLEANING SERVICES, INC.

Principal Place of Business Mailing Address						- A DERIADO DARA DIDOS FOICO DRACO ADAGO A	BII GIBII AISKI BIBII EIBI	II BIBIL DESEL ISOL
16617 WATERS EDGE DR. 16617 WATERS		16617 WATERS EDGE (FT. LAUDERDALE FL 3	S EDGE DR.					
						3. Date Incorporated or Qualified 03/01/1982	3a. Date of Last 08/23/19	
2. Principal Pla	ce of Business	2a. Mailing Address 26				4. FEI Number 59-2163537		Applied For Not Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	7	5 Additional Required
City & State		City & State	•			Election Campaign Financing Trust Fund Contribution		00 May Be ed to Fees
Zip 24	Country 25	Z(p	30	intry		8. This corporation has liability for in Florida Statutes Yes	tangible tax under	
	9. Name and Address of Curren		1441	Ι		10. Name and Address of New Re		
				81	Name			
OSTRAU & RIFKIN, P.A. SUITE 302, 8751 WEST BROWARD BLVD.				82	Street Addres	SS (P.O. Box Number is Not Acceptable	9)	
PLANTATION FL 33324				83				
				84	City		FL 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			Agent	signature required v	when reinstaling) ADDITIONS/CHANGES TO OFFICE	DATE	ODE IN 10
12.	OFFICERS AND DIRECTORS 13 PD DELETE 1.5			ITLE		ADDITIONS/CHANGES TO OFFIC	Change	
NAME	CANIFIELD, MICHAEL		1.2 N					
STREET ADDRESS	16617 NATERS EDGE DR				*UUBECC			i
	FT LAUDERDALE FL			1.3 STREET ADDRESS 1.4 CITY-ST-2IP				
CITY - ST - ZiP	SD	☐ DELETE	2.11		i- Eir		Change	Addition
NAME	PADILLO, HERNANDO		2.2 No					
	8845 NW 153 TERR		_		ADDRESS			
STREET ADDRESS	MIAMI FL							
CITY -ST - ZIP TITLE	INDUM 1 C	☐ DELETE	3. 1 T	ITY-S	1-21r		Chang-	Addition
NAME	- 1		1	3.2 NAME				
STREET ADDRESS					ADDRESS			
CiTY-ST-ZIP				ITY - S				
TITLE		DELETE	4.11	******			Chang:	Addition
NAME			4.2 N	AME				
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP				TY-S				
TITLE		☐ DELETE	5 1 I				Chang:	Addition
NAME		_	5.2 N	AME				
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP			1	TY-S				
THUE		DELETE	6.11				☐ Chang	Addition
NAME			6.2 N					1
STREET ADDRESS			1		ADDRESS			
DIRECT WORKERS			0.3 3	, 11LE1	, LOUI LOU			

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(3)(k). 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 certify 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 changed, or on an attachment with an address.

SIGNATURE:

MULLIS WELLS AND TYPED OF PRINTED NAME OF BORNING OFFICER OR DIRECTOR

4-25-96 (954)726-8866