03-10-1999 90015 035 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

	.000						
DOCUMENT # G05619 1. Corporation Name ABLE WINDOW CLEANING INC.							
Drinning I Ding	- of Dunings	Mailing Address			<u> </u>		
12444 SW 117T MIAMI FL 33186	= -	12444 SW 117TH CT MIAMI FL 33186	MIAMI FL 33186				
					DO NOT WRITE IN TH	IS SPACE	
					3. Date Incorporated or Qualifed		
A Dringing D	loss of Business	2a. Mailing Address			10/21/1982 4. FEI Number	An	plied For
2. Principal Place of Business		2a. Mailing Address		59-2230336	 	t Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 A		
22		27			5. Certifcate of Status Desired	Fee Re	quired
City & Stat	e	City & State			6. Election Campaign Financing	\$5.00 Added to	
23	Country	28 Zip	Country		Trust Fund Contribution		o rees
Zip	Country	⊢ `	30		 This corporation owes the current year Personal Property Tax. 		□No
24	25 A Name and Address of Curre	29 Int Registered Agent	1301		10. Name and Address of New Registere		
	3.		81	Name			
	NSKY, ARTHUR		82	Street Ado	dress (P.O. Box Number is Not Acceptable)		
12444 SW 117 COURT			02	Oli eel Add	areas (1.0. dox realises is reconceptable)		
MIAMI FL 33186			83				
			84	City		. 85 Zip C	ode
				1	F		
11, Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statut	es, the above	e-named corporat	poration submits this statement for the purpose tion's board of directors. I hereby accept the app	of changing its a cointment as rec	registered sistered
agent. I a	m familiar with, and accept the oblig	ations of, Section 607.0505, Flo	rida Statutes	i		•	·
SIGNATURE					red when reinstating) DATE		\
40	Signature, typed or printed name of registered ag	ent and title if applicable (NOTE ND DIRECTORS	13.	nt signature requir	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
TITLE	PD	DELETE	1.1 TITLE		ADDITIONAL OFFICE AND ALL TO SERVE	Change	☐ Addition
NAME	WILINSKY, ARTHUR		1.2 NAME				
STREET ADDRESS	12444 S.W. 117TH COURT		1.3 STREE	TADORESS			
CITY-ST-ZIP	MIAMI FL 33186		1.4 CITY-S	T-ZIP			
TITLE	SD	☐ DELETE	2.1 TITLE			Change	☐ Addition
NAME	WILINSKY, JANET		2.2 NAME				
STREET ADDRESS	12444 S.W. 117TH COURT		2.3 STREE	T ADDRESS			
CITY-ST-ZIP	MIAMI FL 33186		2. 4 CITY-5	ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE			- Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREE	TADDRESS			
CITY-ST-ZIP		[] DELETE	3.4, CITY-5	ST-ZIP		Change	Addition
TITLE		☐ DELETE	4.1 TITLE			Containing	
NAME			4. 2 NAME				
STREET ADDRESS				T ADDRESS			}
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-S 5.1 TITLE	91-ZIP		Change	☐ Addition
NAME			5.2 NAME				
STREET ADDRESS			1	TADORESS	•		ļ
CITY-ST-ZIP			5.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	6.1 TITLE			Change	☐ Addition
			62 NAME	i			

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

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS