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

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZP

CITY-S1-Z/P

TITLE

NAME

TITLE

NAME

TITLE

DOCUMENT #

H97160

(6)

ADVANCED CLEANING AND PAINTING, INC.

Principal Place of Business Mailing Address					I HADIDAN BIND NORTH NORTH LIBRA DANN BRIN BIRLI				
2152 BOLGER AVE SPRING HILL FL 34609		2152 BOLGER AVE Spring Hill Fl 34609							
						3. Date Incorporated or Qualified 01/23/1986	3a. Date o	f Last Re /01/199	
2. Principal Pla	ice of Business	2a. Mailing Address				4. FEI Number			pplied For
21]		26				59-2637606			ot Applicabl
Suite, Apt. #		Suite, Apt. #, etc.	7			5. Certificate of Status Desired			Additional equired
City & State		City & State	¬			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees			
Zip 24	Country 25	Zip 2 9	Gour	ntry		8. This corporation has liability for it Florida Statutes Yes		under s	199.032,
9. Name and Address of Current Registered Agent						10. Name and Address of New R	egistered Ag	gent	
				81	Name				
SIBILIA.	ALFRED		82 Stre			ss (P.O. Box Number is Not Acceptab	1-1		
	DLGER AVE					ss (F.O. Box Number is Not Acceptab	e)		
	HILL FL 34609								
			1					, ,	
				84	City		FL	65 Zip	Code
or registere	o the provisions of Sections 607.050; ed agent, or both, in the State of Flor h, and accept the obligations of, Sec	ida. Such change was authorized	s, the above d by the c	ve-r orpo	named corporat oration's board	tion submits this statement for the pur of directors. Thereby accept the appo	pose of chan	ging its re egistered	gistered off agent. I am
SIGNATURE									
	Signature, typicd or printed name of registered ager			Agor	t signature required v		DATE	· · · · · · · · · · · · · · · · · · ·	
12.			13.			ADDITIONS/CHANGES TO OFFI			
TITLE	• •	☐ DELE1E). 1 TITLE		•	IJ	Change	Addition
NAME	SIBILIA, ALFRED 2152 BOLGER AVENUE		1.2 NAME						
STREET ADORESS	ODDING LIBT FO				ADDRESS				
CITY-ST-ZIP TITLE	OFRING FILL FL	□ DELETE	14 CIT		1 - 7IP			Channa	FT1 Add(4'
			2 1]					Change	Addition
NAME			2.2 NAME						
STREET ADDRESS			23 STHEET ADDRESS						
CITY-ST-ZIP		E DELETE	24 CII		31 - ZIP		····	Channa	Pin Addison
TITLE		DECETE	3 1 TI				LJ	Change	Add tion
NAME !			3.2 NA	MF	1				

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(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 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.

3.3. STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

4.4 CITY - ST-ZIP

34 CITY-ST-ZIP

4. 1 TITLE

4.2 NAME

5 1 TITLE

5 2 NAME

6. 1 TITLE

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DELETE

DELETE

SIGNATURE: While I Stred I Sibilian Pros let 4-30-96 352-683-0048

CR2E034 (12/95)

Change

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Addition

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