OCUMI Corporation Na CLEAN SV CLEAN SV Incipal Place of 1 1214 RAINBROOK VALRICO FL 3355 Principal Place Suite, Apt. #, e City & State	ame <b>NEEP MAID SERVICE, I</b> Business ( <b>CRICLE</b> <del>M</del> of Business		CLE				
1214 RAINBROOK VALRICO FL 3355 Principal Place Suite, Apt. #, e City & State	( CRICLE 94 of Business	1214 RAINBROOK CRI VALRICO FL 33594 28. Maining Address	CLE	<b></b>			
VALRICO FL 3355	of Business	VALRICO FL 33594 2a. Maining Address	CLE				
Suite, Apt. #, e					3. Date Incorporated or Qualified <b>3a.</b> Date of Last Report <b>01/13/1988 04/28/1995</b>		
Suite, Apt. #, e	tc.	26			4. FEI Number	04/20/	Applied For
City & State		Suite Apt #, etc.			59-2903507	\$8	Not Applicable .75 Additional
Ζφ		27 Oity & State			Certificate of Status Desired     6. Election Campaign Financing	Ц , F	ee Required
	Country	<b>28</b>	Count	ý	Trust Fund Contribution  8. This corporation has lability for in Florida Statutes Yes	itangible tax unde	dded to Fees er s. 199.032,
1	25 9. Name and Address of Curre	29 29 Pent Registered Agent	30		Florida Statutes Yes 10. Name and Address of New Re		
			6				
BAUER, JAJ 1214 RAINE	Mes Brook Circle		8	2 Street Addr	ress (P.O. Box Number is Not Acceptable	э)	
VALRICO FL			8	3			
			B	4 City	· · ·	FL 85	Zip Code
2. TLE	PSD	ND DIRECTORS	ανέ Βού ΦιούΑ. 13. 1 1 ΠΠ	aut Septente ne fecturen	d where is installing ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DIRE	
REET ADDRESS	BAUER, JAMES A. 1214 RAINBROOK CIRCLE			IT ADDRESS			
	Valrico Fl	DELETE	2 1 TITL			🗌 Cha	nge 🔲 Addition
REET ADDRESS	BAUER, SYLVIA Y. 1214 RAINBROOK CIRCLE		2 2 NAM 2 3 STRE	ET ADORESS			
ty-st-zip CE ME	Valrico Fl	🗂 DELET <del>E</del>	2.4 CITY 3.1 TUL 3.2 NAM			Cha	nge 🔲 Addilion
REET ADDRESS				ET ADORESS			
TY-ST-ZIP FLE		DEL FIE	3 4 CHY 4 1 THU			Cha	nge 🔲 Addition
			4 2 NAM				
REET ADDRESS TY - ST - ZIP			4 3 STRE 4 4 C(1)	T ADDRESS ST-209			
LE			5 1 lilL			🛄 Cha	nge 📋 Addition
ME REET ADDRESS			5 2 NAM- 5 3 STRE	ET AUDRESS			
TY - ST - ZIP		ריו הנובוב	54 C-1Y				nga 🗖 åddition
ILE ME REET ADDRESS		DELETE	6 1 T-TL 6 2 NAM: 6 3 STRE			Cha	nge 🛄 Addition
TY - ST - ZIP			6.4 CITY	51-7 P			***
<ul> <li>certify that the oath; that I ar</li> </ul>	e information indicated on this an	nual report or supplemental an poration or the receiver or trust	inual report is ee empowere:	rue and accura	for the examplion stated in Section 119.0 ate and that my signature shall have the s is report as required by Chapter 607, Flo Mpml 23, 1996 <sub>Dec</sub>	same lega' effect rida Statutes; an	as if made under d that my name