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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K33846

(2)

**BOCA GRANDE CLEANING, INC.** 

FILED							
May 04 1998 8:00am							
Secretary of State							



Dringing! Dies	o of Dunings	Adadra - Adadra					
Principal Place of Business Mailing Address							
446 FOURTH P O BOX 664		446 FOURTH ST		,			
BOCA GRANDE FL 33921		P O BOX 664 BOCA GRANDE FL 33921		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified		
					09/23/1988		
	lace of Business	2a. Mailing Address			4. FEI Number	Applied For	
Suite, Apt. #, etc.		26			65-0095864	Not Applicable	
22 Suite, Apr.	m, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		A Floring Country Country			
23	•	28			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip			8. This corporation owes or has paid the		
24	25	29	30		Personal Property Tax due June 30.	Yes No	
	9. Name and Address of Curren	it Registered Agent			10. Name and Address of New Registere	d Agent	
TRA	AUTMAN, BILLIE JO		8	Name			
	77 WASHINGTON ROAD		6	2 Street Add	dress (P.O. Box Number is Not Acceptable)		
POI	RT CHARLOTTE 33981		L				
			[6	13			
			8	4 City		85 Zip Code	
44 Durquant	to the provinces of Sections 607 050	2 and 607 t500 Florida Plat			F	<u>L</u>	
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 and title if applicable (NOTE: Registered Agent signature required when reinstating).  DATE							
12.	OF FICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE	P	DELETE	1.1 1174			Change Addition	
NAME	trautman, billie jo		1.2 NAM	E			
STREET ADDRESS	10477 WASHINGTON RD		1.3 STRE	ET ADDRESS			
CITY+ST-ZIP	PORT CHARLOTTE FL		1.4 CitY				
TITLE	VP	L DELETE	2 1 TITLE			Change Addition	
NAME	TRAUTMAN, EDWARD		2.2 NAM		er i		
STREET ADDRESS	10477 Washington RD Port Charlotte FL			ET ADDRESS	·		
CITY-ST-ZIP TITLE	PORT CHARLOTTE FL	DELETE.	2. 4 City 3.1 Title	- ST - ZIP	The state of the s	Change	
NAME			3.1 RIES 3.2 NAM	i		Change Addition	
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP			0.00	-ST-ZIP			
TITLE			4.1 TITLE			Change Addition	
NAME			4. 2 NAM	- 1			
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP			4.4 CITY				
TITLE		DELETE	5.1 TITLE			Change Addition	
NAME			5.2 NAM	:			
STREET ADDRESS			5.3 STRE	e1 address			
CITY-ST-ZIP			5.4 CITY	-S1-ZIP	10.2		
TITLE		☐ DELETE	6.1 TITLE			Change Addition	
NAME	v.		6.2 NAME				
STREET ADDRESS	п		6.3 STRE	ET ADDRESS			
CITY-ST-ZIP	ortific that the information as action will	(1971 - 1977)	64 CITY	ST-ZIP			

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.

Minalas

MATURE FOT IS AS A