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

PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 21 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K36407 (0)BAYSIDE CLEANING SERVICE, INC. Principal Place of Business Mailing Address 14040-OLD-US-41 -14948-OLD-US 41 DO NOT WRITE IN THIS SPACE NAPLES FL 34110 NAPLES FL 33963 3. Date Incorporated or Qualified 10/04/1988 2. Principal Place of Business
13 27850 HACIETY A E BLVD 26 P.O. Box 4. FEI Number Applied For 65-0066648 Not Applicable Suite, Apt. #, etc. Suite. Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired <u> 203C</u> Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing \mathcal{P} GIXAS 23 Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 29 Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 MOSBACH, ROBERT G. JR. 27850 HACIENDA E BLVD 82 Street Address (P.O. Box Number is Not Acceptable) 203C 83 BONITA SPRINGS FL 33922374134 84 City Zip Code 85 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 the if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE **PDST** DELETE 1 1 TITLE Change Addition MOSBACH, ROBERT G JR NAME 1.2 NAME 27840 HACIENDA E BLVD 203C STREET ADDRESS 1.3 STREET ADDRESS **BONITA SPGS FL** CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE Change Addition TITLE 2.1 TITLE 2.2 NAME STREET ADDRESS 2 3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition 3 1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY-ST-ZIP DELETE ☐ Addition TITLE 4 1 TITLE Change NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Addition Change TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE 6.1 TITLE ☐ Change Addition TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY - ST - ZIP 14. I hereby certify that the information supplied with this filing doos 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.