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 #

(1)

WHITE KNIGHT CARPET CLEANING, INC.

FILED May 13 1998 8:00am Secretary of State

Principal Place of Business			Mailing Address				t tabusun das Bitat senti adult anus sant Bien Steir arbit arbit erdit Bien tabi			
2035 53RD AVENUE VERO BEACH FL 32988 US			2035 53RD AVENUE VERO BEACH FL 32968 US				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
2. Principal Place of Business			2a. Mailing Address			<u> </u>	01/12/1989 4. FEI Number Applied For Not Applicable			
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired			
City & State			City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution ☐ Added to Fees			
24	Zip 2:		Zip Coi		ıntry		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
	g, Name a	nd Address of Current R	Registered Agent	10. Name and Address of New Registered Agent						
bonich, skill					81	Name				
	2035 53RD AVI VERO BEACH I					Street Address (P.O. Box Number is Not Acceptable)				
				83						
				84	City	FL 85 Zip Code				

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 hyme of registered agent and title if appropriative (NOTE: Registered Agent signature required when reinstating) DATE												
12.	OFFICERS AND DIRECTO	RS	13. ADDITIONS/CHANGES TO OFF		FFICERS AND DIRECTOR	S IN 12						
TITLE	PO	DELETE	1,1 TITLE		Change	Addition						
NAME	BUHLER, DONALD		1.2 NAME			Į						
STREET ADDRESS	2035 53RD AVENUE		1.3 STREET ADDRESS			į						
CITY-ST-ZIP	VERO BEACH FL		1.4 CITY-ST-ZIP									
TITLE	STD	DELETE	2.1 TITLE		Change	Addition						
NAME	Buhler, Sally		2.2 NAME			Í						
STREET ADDRESS	2035 53RD AVE		23 STREET ADDRESS									
CITY - ST - ZIP	VERO BEACH FL		2. 4 CITY-ST-ZIP									
TITLE		☐ DELETE	3.1 TITLE		Change	Addition						
NAME }			3.2 NAME			ļ						
STREET ADDRESS			3.3 STREET ADDRESS									
CITY-ST-ZIP			3.4. CITY - ST - ZIP			[
TITLE		DELETE	4.1 TITLE		☐ Change	Addition						
NAME			4. 2 NAME									
STREET ADDRESS			4.3 STREET ADDRESS									
CITY-ST-ZIP			4.4 CITY-ST-ZIP			1						
TITLE		DELETE	5.1 TITLE		☐ Change	Addition						
NAME			5.2 NAME									
STREET ADDRESS			5.3 STREET ADDRESS			ì						
CITY-ST-ZIP			5.4 CITY-ST-ZIP									
TITLE		DELETE	6.1 TITLE		Change	Addition						
NAME			6.2 NAME			ľ						
STREET ADDRESS			6.3 STREET ADDRESS									
CITY-ST-ZIP			6.4 CITY-ST-ZIP									

14. Thereby 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 supplimental 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 trustate 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.