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

PROFI1 CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # K85636 (4) LITTLE RIVER JANITORIAL SERVICES CORPORATION Principal Plane of Business Mailing Address * Thomas Tanks 9310 N W LITTLE RIVER DR MIAMI FL 33147 MIAMI FL 33147						
WILLIAM 12 007					3. Date Incorporated or Qualified 05/04/1989	3s. Date of Last Report 04/19/1996
2, Principal F 21	Place of Business	2a, Mailing Address 26		4. FEI Number 65-0112096	Applied For Not Applicable	
Suite Apt	#. ele	Suite. Apt. #, etc.			5. Certificate of Status Desired	S8.75 Additional Fee Required
City & Sta	Ke	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Ζφ 24	Country 25	Zip 29	Count 30	ry		Yes 🔯 No
	9. Name and Address of Current	Registered Agent		41 11	10. Name and Address of New Re	gistered Agent
	IKS, THOMAS		8	1 Name		
9310 N W LITTLE RIVER DR			8	82 Street Address (P.O. Box Number is Not Acceptable) 83		
MIA	MIAMI FL 33147					
			1	~		
			8	4 City		FL 85 Zip Code
office or agent 1. SIGNATURE	an Litriliar with, and accept the obligat Spenie good or mention dragice engine OFFICERS AND	and the diapplicable (NO	londa Statul	es.	orporation submits this statement for the pration's board of directors. I hereby accel quired when renstating) ADDITIONS/CHANGES TO OFFICE	DATE
THTCF	TANKS, THOMAS 9310 N W LITTLE RIVER DR		1.1 T(TLE			Change Addition
NAME STREET ADDRESS			1.2 NAM 1.3 STHE	E FT ADDRESS		
CHY-ST ZIP	MIAMI FL		1.4 City	-St-7iP		
THE	VD	DELETE 2.1 I		:		Change Addition
P7A5	ANA NI WILLERS CONCO DD		2.2 NAM			
STREET ADDRESS	9310 N W LITTLE RIVER DR			ET ADORESS		
City - 51 - Z = 1	MIAMI FL SD	DELETE	2 4 CITY 3 1 TITLE	r-ST-ZIP		Change Addition
) ICE NAME	TANKS, DARRYL	E DESCIE	3 2 NAM	}		C Cuarige C Modition
STREET ADDRESS	0340 N W LITTLE DIVED DR			ET ADDRESS		
CITY ST-7#	MIAMI FL			-SI-ZIP		
1141F		DELETE	4.1 TITL			Change Addition
NAME			4. 2 NAM	4E		
STREET ADDRESS			4 3 STRE	ET ADDRESS		
CHY-ST ZIP			4.4 CITY	- \$1 - 71P		
*III.		DELETE	5 1 T-TL			Change Addition
NAM:			5.2 NAM	E]		
STREET ADDRESS.			ľ	ET ADDRESS		
CITY ST-7P		Deier		- ST - ZIP		Channa 6 ddC
Tittl		☐ DELETE	6 1 1111			Change Addition
NAME Constant Archive con			62 NAM	i		
STREET ADORESS				ET ADDRESS		
00Y 51 2H	L. seettly that the information supplied	with this filling does not gua		·ST-ZIP remption sta	ted in Section 119.07(3)(i). Florida Statute	s. I further certify that the

Too hereby that the information supplied with this hing does not qualify to the exemptor stated in Section 119.07(3)(), Florida Statutes. Finither certify that information indicated on his annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I are 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.

Thunked Don 16

FILED

Mar 24 1997 8:00am

Secretary of State