COF ANNU	PROFIT RPORATION JAL REPORT (FLOHIDA DEPARTMENT OF STATE Sanora B. Mortham Secretary of State DIVISION OF CORPORATIONS (5)						
DOCUI	MENT # L.7	70436							
•	NE'S CLEANING INC					A 1884 ISAN SIN ARSIN BANK BIRAS	iilia siii ajair sii	lai a iau ai	k ij b rok Belle to de
Principal Place	of Rusinees	Adviso	Add						
Principal Place of Business 178 E. ALMA AVE. 178 E ALMA AVE. LAKE MARY FL 32746		17 17	Maing Address 173 E. Alma Ave. 178 E Alma Ave. Lake Mary Fl 32746						
US		U	S			3. Date Incorporated or Qualified 05/03/1990	3a. Date o	of Last R 5/01/1	
	ace of Business	2a. Ma 26	iling Address SAA1E			4. FEI Number 59-3011802			Applied For
Suite, Apt.			ite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75	Not Applicable Additional Required
City & State)		y & State			Election Campaign Financing Trust Fund Contribution		\$5.0	May Be
Ζιρ 4	Country 25	Z ₁	- F	Count	ry	8. This corporation has liability for	intangible tax		
	9. Name and Address	of Current Registere	d Agent		1 Name	10. Name and Address of New F	Registered A	gent	
PALME	er, darrell			8	1	iress (P.O. Box Number is Not Acceptal	-1->		
	ALMA AVE.					ress (* .O. Dox Namber is Not Acceptat	ле) 		
LAKE	MARY FL 32746			8	3			•	
				8	1 '		FL	l I '	Code
 Pursuant t or register 	o the provisions of Sections ed agent, or both, in the Sta	607.0502 and 607.19 de of Fiorida, Such chi	08, Florida Statutes,	the above	named corpo	ration submits this statement for the pu	rpose of chan	ying its r	egistered office
	th, and accept the obligation Danker Falmi	is of, Section 607.050	5 Florida Statutes.	-,	providence in the same	rd of directors. I hereby accept the app	4/2		agent ram
SIGNATURE _	Signature types or persect have of re-	er t pd⇔redage taldte byga	a sint	Regional Ac	r e bejt it di tranco	a tok te o teotralingi	DATE	2/7	~
12.		CERS AND DIRECTOR		13.		ADD-110NS/CHANGES TO OFF			
TITLE	PV DALMED DARDELL		☐ DELETE	1 1 Tills				Change	Addition
NAME	PALMER, DARRELL 178 E ALMA AVE	•		1.2 NAMI					
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City - ST - ZiP Title	ST		DELETE	2 1 TITLE			··	Change	M Addition
	PALMER, CILENE			2.2 NAMI			Ц	Change	☐ Addition
1MAN	178 E. ALMA AVE.				T ADDRESS				
NAME Street adoress					T FIGE TEGS				
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14. I do hereby certify that the information supplied with this fining is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 comporation 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 artichment with an address.

SIGNATURE:

Day Plant

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10. (407) 330.0630

4/22/96 (407) 330.0630