

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morzham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

DOCUMENT # **L77922** (7)

95 APR -6 AM 10: 04

1. Corporation Name  
**BAUGHS (INTERNATIONAL) JANITORIAL SERVICES OF SOUTH FLORIDA, INC.**

Principal Place of Business	Mailing Address
10221 N.W. 33RD STREET APT. #1 CORAL SPRINGS FL 33065	10221 N.W. 33RD STREET APT. #1 CORAL SPRINGS FL 33065

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified <b>06/05/1990</b>		3a. Date of Last Report <b>10/05/1994</b>	
4. FEI Number <b>65-0195979</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21		26		65-0195979		<input type="checkbox"/> Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing		<input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State		City & State		8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
23		28					
Zip	Country	Zip	Country				
24	25	29	30				

9. Name and Address of Current Registered Agent  
**BAUGH, WINSTON A  
10221 N.W. 33RD STREET  
APT. #1  
CORAL SPRING FL 33065**

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

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		(NOTE: Registered Agent signature required when re-registering)		DATE			
Signature, typed or printed name of registered agent and title if applicable							
12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	DP	1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	BAUGH, WINSTON A	1.2 NAME					
STREET ADDRESS	10221 N.W. 33RD STREET, #1	1.3 STREET ADDRESS					
CITY - ST - ZIP	CORAL SPRINGS FL 33065	1.4 CITY - ST - ZIP					
TITLE	DS	2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	BAUGH, GARY A	2.2 NAME					
STREET ADDRESS	10221 N.W. 33RD STREET, #1	2.3 STREET ADDRESS					
CITY - ST - ZIP	CORAL SPRINGS FL 33065	2.4 CITY - ST - ZIP					
TITLE		3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME		3.2 NAME					
STREET ADDRESS		3.3 STREET ADDRESS					
CITY - ST - ZIP		3.4 CITY - ST - ZIP					
TITLE		4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME		4.2 NAME					
STREET ADDRESS		4.3 STREET ADDRESS					
CITY - ST - ZIP		4.4 CITY - ST - ZIP					
TITLE		5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME		5.2 NAME					
STREET ADDRESS		5.3 STREET ADDRESS					
CITY - ST - ZIP		5.4 CITY - ST - ZIP					
TITLE		6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME		6.2 NAME					
STREET ADDRESS		6.3 STREET ADDRESS					
CITY - ST - ZIP		6.4 CITY - ST - ZIP					

14. I do hereby certify that the information supplied with this filing 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 corporation or the receiver or trustee empowered to execute this report as required by Chapter 307, Florida Statutes; and that my name appears in Block 12 or Block 13 unchanged, or on an attachment with an address.

SIGNATURE: Winston A. Baugh WINSTON A. BAUGH 4/7/95 305-522-2022

Signature and typed or printed name of signing officer or director Date (Month/Day/Year)