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 #

L87941

(5)

CLEANING SERVICE CONSULTANTS, INC.

OLEANII	IG SERVICE CONSULTANT	10, INO			
Principal Place	of Business	Mailing Address			ija 1 augu aran) dibin diana kaan
3014 US HWY 301N SUITE 400 TAMPA FL 33619 US		3014 US HWY 301N SUITE 400			
		TAMPA FL 33619 US		DO NOT WRITE IN THIS SPACE.	
				3. Date Incorporated or Qualified	
				07/16/1990	A
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For Not Applicable
21		Suite, Apt. #, etc.		65-0207560	\$8.75 Additional
Suite, Apt. #, etc.		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Ζφ	Country	8. This corporation owes or has paid the c	urrent year Intangible
24	25	29	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curren	it Registered Agent		10. Name and Address of New Registered	d Agent
FUI	LER, JEFFERY M.		81 Name		
	SOUTH ASHLEY DRIVE		82 Street Addi	ress (P.O. Box Number is Not Acceptable)	
	TE 1300				
	MPA FL 33602		83		
			84 City		85 Zip Code
				F	L
office or re agent. I ar	o the provisions of Sections 607 050 ogi st ered agent, or both, in the State in fam iliar with, and accept the obligi	of Florida, Such change was a	iuthorized by the corporat	poration submits this statement for the purpose tion's board of directors. I hereby accept the ap	or changing its registered oppointment as registered
SIGNATURE	Signature: typed or ponted natur of repistered age	ot and title Lappecable (NOTE	Hegistered Agent signature requi	red whon reinstating) DATE	
12.	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	D	DECETE	1.1 TITLE		Change Addition
NAME	Green, James E.		1.2 NAME		
STREET ADDRESS	109 HOLLY TREE LANE		13 STREET ADDRESS		
CITY - ST - ZIP	BRANDON FL		1.4 CITY - S1 - ZIP		Observa Datables
TITLE	D	DELETE	2 1 TITLE		☐ Change ☐ Addition
NAME	GREEN, PEGGY		2.2 NAME		
STREET ADDRESS	109 HOLLY TREE LANE		2.3 STREET ADDRESS		
CITY-ST-ZIP	BRANDON FL	T OF FEE	2 4 CITY - ST - ZIP		Change Addition
TITLE		☐ DELETE	3 1 TITLE		L Change L Houston
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	3.4 CITY - ST - 7IP		Change Addition
TITLE			4.1 TITLE		
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADORESS		
CITY-ST-ZIP		DELETE	4.4 CITY- ST- ZIP 5.1 TITLE		Change Addition
TITLE		FT MILL			
NAME			5 2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
TITLE		L) (PECETE			
NAME'			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

CITY-S1-ZIP

14. Thereby certify that the information supplied with this thing 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 suppliemental 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 charged or on an attachment with an address.