3-18-48 B-3390 C 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

EII ED

									
1. Corporation	MENT # M665 R'S SPRAY SERVICES, II	- 1							
Principal Place of Business Mailing Address							STOLL BLOSH BIRSH ON	IN BIOM IDE	
% GLENN R. GARBER % GLENN R. GARBER									
240 14TH STREET S.E. 240 14TH STREET S.E.			•			DO NOT WRITE IN THIS SPACE			
NAPLES FL 33964 NAPLES FL 33964						3. Date Incorporated or Qualified			
						02/01/1988		ì	
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	A	pplied For	
21		26	26			65-0041906		lot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	 			5. Certificate of Status Desired		Additional lequired	
City & State	6	City & State	City & State			6. Election Campaign Financing	\$5.00	May Be	
23		28				Trus Fund Contribution		to Fees	
Ζϊρ	Country	7ip	Coun			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. X Yes No			
24 25 29 30 9. Name and Address of Current Registered Agent				Τ		10. Name and Address of New Registered Agent			
GAI	RBER, GLENN R.			61	Name				
240 14TH STREET S.E.					Oi cont A	70.0 0 No. 10 No			
NAPLES FL 33964				62	Street A	ddress (P.O. Box Number is Not Acceptable)		. }	
	223 1 2 3333 1			63					
- .				84	City		85 Zip	Code	
11. Pursuant office or reagent. La	to the provisions of Sections 607.6 egistered agent, or both, in the St m familiar with, and accept the ob	J502 and 607,1508, Florida Stat ate of Florida. Such change was bligations of, Section 607,0505,	tutes, the a s authorize Florida Sta	bove d by tutes	named c the corpo	orporation submits this statement for the purpo gration's board of directors. I hereby accept the	se of changing appointment as	its registered s registered	
SIGNATURE							1 16		
12.	Signature, typed or printed hame of registrated	AND DIRECTORS (NO	OTE Registere	d Age	nt signatura re	aguired when reinstaling) DA ADDITIONS/CHANGES TO OFFICERS		BS IN 12	
TITLE	D OFFICERS.	DELETE	1.1 10	TLE		ADDITIONO/OFIANTALO TO OFF IDENS	Change	Addition	
NAME	GARBER, GLENN R.		1.2 N		\				
STREET ADDRESS	240 14TH STREET S.E.				ADDRESS			13	
CITY-SY-ZIP	NAPLES FL			ITY - S	. i	34117]	
TITLE	D						Change	Addition	
NAME	GARBER, SUSAN A.		2.2 N	AME					
STREET ADDRESS	240 14TH STREET S.E.		2.3 \$		address	<u> </u>			
CITY-ST-ZIP	NAPLES FL			ITY-S	7-21P	34/17			
TITLE		☐ DELETE	3.1 11		}		Change	Addition	
NAME			3.2 N					1	
STREET ADDRESS					ADDRESS			- 1	
CITY-ST-ZIP TITLE		DECETE	3.4. C	ITY-S	1-ZIP		Change	Addition	
NAME		FT pereir	4.2 N		ļ		fr Audillo		
STREET ADDRESS					ADDRESS			[
CALIFFE HONDIESS			■ 9.3 3	MALE I				,	

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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.2 NAME

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

NAME

DELETE

DELETE

3-12-98

941-HSS-7W3
Destime Phone * 0444248

Change

Change

Addition

Addition