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 # M91884

(0)

TOTAL CLEANING CONCEPTS, INC.

FILED									
May 08 1998 8:00am									
Secretary of State									

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Principal Place of	Business	Mailing Address				ILBOS GIBST ETATO BIBIT (AA)	
1211 MIRAMAR ST STE 4 CAPE CORAL FL 33804 US		1211 MIRAMAR ST #4 Cape Coral Fl 33904 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/01/1988			
2. Principal Place	of Business	2a. Mailing Addres	s\$		4. FEI Number	Applied For	
21		26	26		.65-0069600	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, 6	Suite, Apt. #, etc.		5, Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State	´		6. Election Campaign Financing Trust Fund Contribution	,	
Zip 24	Country 25	7 ip	30	untry		Yes No	
g, Name and Address of Current Registered Agent					10. Name and Address of New Registered A	lgent	
WISEM	IAN, DEBORAH A.			81 Name			
1632 S W 27 ST CAPE CORAL FL 33914			82 Street Address (P.O. Box Number is Not Acceptable)				
V. W. B.				83			
	_			84 City	FL	85 Zip Code	
44 Pureuant to th	novisions of Sections 607	0502 and 607 1508. Florida	Statutes the a	hove-named co	proporation submits this statement for the purpose of	changing its registered	

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.

ayanı ra	in talinila: with, and accept the dunganone	101, DECROIT 007.0303, FIOR	da Statutes.				
SIGNATURE	Signature, typed or printed name of registered agent and	title if applicable. (NOTE:	Registered Agent signature	o required when reinstating)	DATE		
12,	OFFICERS AND DIF		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	f	DELETE	1.1 TITLE		☐ Change	Addition	
NAME !	WISEMAN, DEBORAH A.		1.2 NAME				
STREET ADDRESS	1632 S.W. 27TH ST.		1.3 STREET ADDRESS				
CITY-ST-ZIP	CAPE CORAL FL		1.4 CITY-ST-ZIP				
TITLE	P	☐ DELETE	2.1 TITLE	P . ~ ' ~	Change	Addition	
NAME	SAVERBREY, PAMELA A.		2.2 NAME		Amela		
STREET ADDRESS	130 BAYSHORE DR.		2.3 STREET ADDRESS	3742 S.E. 1511 P	\ _+_		
CITY-ST-ZIP	CAPE CORAL FL		2. 4 CITY - ST - ZIP	Cape Coral Fl. 3	3904		
TITLE	\$	DELETE	3.1 TITLE	2 , ,	⊠ Change	Addition	
NAME	SAVERBREY, DOREEN A.		3.2 NAME	Squerbrey Dorsen	<i>A</i>		
STREET ADDRESS	130 BAYSHORE DR.		3.3 STREET ADDRESS	Saverbrey Dorsen	د		
CITY-ST-ZIP	CAPE CORAL FL		3.4 CITY-ST-ZIP	Cape Coral, Fl			
TITLE		DELETE	4.1 TITLE		Change	Addition	
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 C(1Y-SY-Z)P				
TITLE		☐ DELETE	5.1 TITLE		☐ Change	☐ Addition	
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE		☐ Change	☐ Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY ST. 7IP			6.4 C(TY+ST-7)P]			

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.

M-DK-90 941-549-400