FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

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

APPROVED
AND
FILED

95 APR 11 AM 11:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-04/12/95--01083--015
****200.00 ****200.00

DO NOT WRITE IN THIS SPACE

DOCUMENT # **P92000001605 (4)**

1. Corporation Name

B & S MAINTENANCE & JANITORIAL SERVICES, INC.

Principal Place of Business
4251 NE 2ND AVE
POMPANO BEACH FL 33064

Mailing Address
3500 N STATE RD 7
100-A
LAUDERDALE LAKES FL 33319
US

3. Date Incorporated or Qualified: **11/02/1992**
3a. Date of Last Report: **04/21/1994**

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip
24
Country
25

2a. Mailing Address
26 3500 N State Rd 7
Suite, Apt. #, etc.
27 201
City & State
28 Lauderdale Lakes
Zip
29 FL
Country
30 33319

4. FEI Number: **65-0372744** — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

SOTO, OSCAR
4251 NE 2ND AVE
POMPANO BEACH FL 33062

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — **FL** — 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: Oscar Soto — 3/30/95
(Signature of a corporate officer, the registered agent, or the registered agent's attorney) (Date) (Registered Agent's Signature and after mailing)

12. OFFICERS AND DIRECTORS

TITLE	PTS
NAME	OSCAE, SOTO
STREET ADDRESS	4251 NE 2ND AVE
CITY, ST, ZIP	POMPANO BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 TITLE		☐ Change ☐ Addition
1 NAME		
1 STREET ADDRESS		
1 CITY, ST, ZIP		
2 TITLE		☐ Change ☐ Addition
2 NAME		
2 STREET ADDRESS		
2 CITY, ST, ZIP		
3 TITLE	TIS. 4/11/95	☐ Change ☐ Addition
3 NAME		
3 STREET ADDRESS		
3 CITY, ST, ZIP		
4 TITLE		☐ Change ☐ Addition
4 NAME		
4 STREET ADDRESS		
4 CITY, ST, ZIP		
5 TITLE		☐ Change ☐ Addition
5 NAME		
5 STREET ADDRESS		
5 CITY, ST, ZIP		
6 TITLE		☐ Change ☐ Addition
6 NAME		
6 STREET ADDRESS		
6 CITY, ST, ZIP		

14. I 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)(ii), Florida Statutes. 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 trustee 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: Oscar Soto — 3/30/95 — (305) 754-9645
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — (Date) — (Daytime Phone #)
OSCAR SOTO PRESIDENT

0327000 CP