

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P92000007041 (6)

1. Corporation Name

PINEDA'S JANITORIAL AND MAINTENANCE SERVICE INC.



Principal Place of Business

1005 W OAKRIDGE RD
STE 4
ORLANDO FL 32809
US

Mailing Address

1005 W OAKRIDGE RD
STE 4
ORLANDO FL 32809
US

3. Date Incorporated or Qualified
11/24/1992

3a. Date of Last Report
03/21/1995

2. Principal Place of Business

21 5907 TOMOKA DRIVE

2a. Mailing Address

26 Suite, Apt. #, etc.

22 City & State

23 ORLANDO, FLORIDA

24 Zip Country
32809 USA

27 City & State

28 Zip Country

29 30 SAME

4. FEI Number

59-3147946

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

PINEDON, JOSE'S S
7386 SPRING VILLA CIRCLE
ORLANDO FL 32819

10. Name and Address of New Registered Agent

81 Name José S. Pineda Jr

82 Street Address (P.O. Box Number is Not Acceptable)
9536 BRACKIN ST

83

84 City Orlando

FL

85 Zip Code 32825

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 *Jose S. Pineda Jr* (José S. PINEDA, Jr) PRESIDENT.

DATE 2/21/96

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE DP ☐ DELETE

NAME PINEDA, JOSE'S S
STREET ADDRESS 7386 SPRING VILLA CIRCLE
CITY-ST-ZIP ORLANDO FL

TITLE VPC ☐ DELETE

NAME PINEDA, LUCRECIA
STREET ADDRESS 7386 SPRING VILLA CIR
CITY-ST-ZIP ORLANDO FL

TITLE TMD ☐ DELETE

NAME PINEDA, JOSE'S JR
STREET ADDRESS 9536 BRACKIN ST
CITY-ST-ZIP ORLANDO FL

TITLE SMD ☐ DELETE

NAME PINEDA, JOSE L
STREET ADDRESS 9536 BRACKIN ST
CITY-ST-ZIP ORLANDO FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT ☒ Change ☐ Addition

1.2 NAME José S. Pineda, Jr
1.3 STREET ADDRESS 9536 BRACKIN ST
1.4 CITY-ST-ZIP ORLANDO, FLORIDA, 32825

2.1 TITLE VICE-PRESIDENT ☐ Change ☒ Addition

2.2 NAME MARTIN D. PINEDA
2.3 STREET ADDRESS 4369 BRIDGE WOOD TRAIL
2.4 CITY-ST-ZIP ORLANDO, FLORIDA, 32818

3.1 TITLE José S. Pineda, Sr ☒ Change ☐ Addition

3.2 NAME CHAIRMAN - MANAGING DIRECTOR
3.3 STREET ADDRESS 5608 CRAINDALE DRIVE
3.4 CITY-ST-ZIP ORLANDO, FLORIDA, 32819

4.1 TITLE SECRETARY DIRECTOR ☒ Change ☐ Addition

4.2 NAME LUCRECIA PINEDA
4.3 STREET ADDRESS 5608 CRAINDALE DRIVE
4.4 CITY-ST-ZIP ORLANDO, FLORIDA, 32819

5.1 TITLE TREASURER ☒ Change ☐ Addition

5.2 NAME José L. Pineda
5.3 STREET ADDRESS 9536 BRACKIN ST
5.4 CITY-ST-ZIP ORLANDO, FLORIDA, 32825

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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

SIGNATURE: *Jose S. Pineda Jr* (José S. PINEDA Sr) CURRENT D.P. 2/21/96 - 407-858-9525

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (12/95)