PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P9300001227

1. Corporation Name

DEE OF EAST OF EASTEDS IT INC

BEE CLEAN CLEANERS II, INC.	j			
Rrincipal Place of Business	Mailing Address			
3418 GLOSSY IBIS COURT PALM HARBOR FL 34683	3418 GLOSSY IDIS COURT PALM HABBOR FL 34683			
2 Principal Place of Business	2a. Mailing Address	_		

FILED Apr 08, 1999 8:00 am Secretary of State

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Principal Place	e of Business	Mailing Address			(100 HORT 110 18155 11111 1			
3418 GLOSSY I PALM HARBOR		3418 GLOSSY JBIS COURT PALM HABBOR FL 34683			`	WORTE IN THE	CDACE	
	<u> </u>					WRITE IN THIS	S SPACE	
				l l	ate Incorporated or Qua 1/01/19 <u>93</u>	alited 		
2. Principal Pl	lace of Business	2a. Mailing Address	440	l l	El Number		<u> </u>	plied For
21 206	o old oak circle		<u> 5192 </u>		<u>9-3161061 </u>			t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. C	ertifcate of Status Desi	red 🔲	\$8.75 / Fee Re	
City & Stat	te	City & State			ection Campaign Finar	ncing	\$5.00	May Be
23 PALM	HARBOR, FL.	28 CLEARWATER	FL.	Tr	rust Fund Contribution		Added	•
Zip 346	83 ZS VSA	Zip 29 33758 3	Sountry USA	I	his corporation owes the ersonal Property Tax.	e current year Ir	itangible	□No
241 0 70	9. Name and Address of Current			10. N	ame and Address of I	New Registered	l Agent	
			81 Name					
	REGORIO, CAROL H B GLOSSY IBIS COURT		82 Street	Address (P.O	. Box Number is Not A	cceptable)		
	M HARBOR FL 34683		83		· · ·			
]								
			84 City			FI	_ 85 Zip (Code
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statutes	, the above-named	corporation s	ubmits this statement for	or the purpose o	f changing its	registered
office or r	registered agent, or both, in the State of am familiar with and accept the obligation	of Florida, Such change was auth	norized by the corp	oration's boar	d of directors. I hereby	accept the appo	ointment as re	gistered
ļ.	im ramiliar with and accept the beingain	005 01, 350,0011 207.0303, 13010	a Statutes.					
SIGNATURE	Signature, typed or printed name of registered agent	1// /						
		Landul Landicatie. (NOTE: Re	egistered Agent signature	required when reins	stating)	DATE		
12.	OFFICERS AND		egistered Agent signature		stating) DITIONS/CHANGES T		ND DIRECTO	DRS IN 12
12.				OP AD	DITIONS/CHANGES T	O OFFICERS A	ND DIRECTO	
	OFFICERS AND	D DIRECTORS	13.	DIGRESS	DITIONS/CHANGES T	O OFFICERS A		
TITLE NAME	OFFICERS AND OP DIGREGORIO, CAROL H.	D DIRECTORS	13. 1.1 TITLE	DIGRESS	DITIONS/CHANGES T	H.	Change	
TITLE NAME STREET ADDRESS	OFFICERS AND OP DIGREGORIO, CAROL H. 3418 GLOSSY IBIS COURT	D DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	206 OL	DITIONS/CHANGES T	O OFFICERS A	Change	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND OP DIGREGORIO, CAROL H.	D DIRECTORS	13. 1.1 TITLE 1.2 NAME	206 OL	DITIONS/CHANGES T 1,410 , CAROL D OAK CURC	H.	Change	☐ Addition
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14. I hereby 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, with all other like empowered.

SIGNATURE: