## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



I LORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## P93000015647 (9) **DOCUMENT #**

NATIONAL EXHAUST CLEANING, INC.

Principal Place of Business Mailing Address 6001-27 ARGYLE FOREST BLVD. 6001-27 ARGYLE FOREST BLVD. SUITE 89 SUITE 89 JACKSONVILLE FL 32244 JACKSONVILLE FL 32244-8838 3a. Date of Last Report 3. Date Incorporated or Qualified 02/23/1993 03/15/1996 4. FEI Number 2. Principal 2 ace of Business 2a. Mailing Address Applied For 59-3172324 21 26 Not Applicable Suite, Apt. #, etc. Suite Apt #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 2m Country Zιρ Country 8. This corporation has liability for intangible tax under s. 199.032, 🔀 Yes 🔲 No 24 25 29 30 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name JACOBS, ROBERT M 6001-27 ARGYLE FOREST BLVD. **B2** Street Address (P.O. Box Number is Not Acceptable) SUITE 89 JACKSONVILLE FL 32244 83 City 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. Supplies that it is pented in the property Agent against applicable. (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Addition DELETE Change 1.1 TITLE 101:1 JACOBS, ROBERT M NAME 1.2 NAME 351 CROSSINGS BLVD. STREET ALORESS 1.3 STREET ADDRESS **ORANGE PARK FL 32073** 14 CITY - ST - ZIP DELETE Addition Change 21 TITLE Blok JACOBS, MARLENE H 1.454 2.2 NAME 351 CROSSINGS BLVD. 2.3 STREET ADDRESS STREET ARCESS **ORANGE PARK FL 32073** C17: \$1-20° 2. 4 CITY-ST-ZIP DELETE 3.1 TITLE Change Addition 11"18 3.2 NAME NAM 3.3 STREET ADDRESS STREET ALLINESS -ST-ZIP CHY 51-7a DELETE Change Addition 1 [1] 4.1 (0 4.2 N STREET ALTORESS 4.3 S T ADDRESS ST-ZIP 1. TY - \$1 - 7ff 4.4 Cf DELETE ☐ Change Addition 5.1 10 TOUR 5.2 NA NAMS 5.3 STEET ADDRESS SPROUNT ADDRESS 5.4 CITY - ST - ZIP DELETE 6.1 TITLE Change Addition FRIE NSME 6.2 NAME STREET AUGINESS 63 STREET ADDRESS

64 CITY - ST - ZIP 14. I do hereby corbly that it endormation 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

CHY ST ZE

1-22-97 904 578-0257

FILED

Mar 31 1997 8:00am

Secretary of State

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