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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000023506 (7)

ALL SOUTH FLORIDA PRESSURE CLEANING, INC.

Principal Place of Business

Mailing Address

FILED Apr 28 1998 8:00am Secretary of State



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1257 SPRING CIRCLE DR CORAL SPRINGS FL 33071				1257 SPRING CIRCLE DR						}					
				CORAL SPRINGS FL 33071						DO NOT WRITE IN THIS SPACE					
										3. Date Incorporated or Qualified					
										03/26/1993					
2. Principal Place of Business					2a, Mailing Address					4. FEI Number			Ar	plied For	4
21				26						65-0406287		-	\rightarrow	t Applicable	7
Suite, Apt. #, etc.				Suite, Apt. #, etc.]		\$8	_	Additional	4
22				27						5. Certificate of Status Desired				equired	
City & State				City & State						6. Election Campaign Financing		\$ 5	.00	May Be	7
23				28						Trust Fund Contribution				to Fees	1
Zip		Country Zip Co				Country 8. This corporation owes or has paid the current year intaggible									
24					30					Personal Property Tax due June 30. Yes X No					
	g, Name	and Address o	Current R	egle	stered Agent	 	10. Name and Address of New Registered Agent								
1	roale, jan	ies c					81	Name	9						
1257 SPRING CIRCLE DRIVE CORAL SPRINGS FL 33071							82	Stree	Street Address (P.O. Box Number is Not Acceptable)		e)				1
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							84	City					Zin (Code	4
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11, Pursuant	to the provisi	ons of Sections	607.0502 ar	nd 6	07.1508, Florida Sta tu	ıles, the	abov	e-name	d corpo	oration submits this statement for the pi	irpose of	chang	jing it	s registered	1
onice or i	regi ster ed ag am f am iliar wi	ent, or both, in t th, and accept t	ne State of F he obligation	· lori ns α	da. Such change was if. Section 607.0505, F	authori Iorida S	zed b latute	y the co is.	rporatio	on's board of directors. I hereby accep	t the appo	ointme	nt as	registered	
SIGNATURE					,										-
SIGNATURE	Signature, typod	or printed name of reg	petered agent an	KI bile	i i applicable (NC	TE Regist	ered Ag	eni signali	re require	d when reinstating)	DATE				ءا
12.		OFFIC	ERS AND D	IRE	CTORS	1:	3.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRE	CTOR	IS IN 12	٤
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NAME						·	NAME		1						1
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14. I nereby (certify that the	s intormation sup	ppilea with t	nis t	hling does not qualify	for the e	xemp	nion sta	ted in S	Section 119.07(3)(i), Florida Statutes. I f	urtner cel	tiry tha	at the	information	