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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## 1997 DOCUMENT # P93000029197 (9)

TIDY BUILDING MAINTENANCE SERVICES, INC.

<b>_</b>							
Principal Place of Business Mailing Address					i coditoni cin (Nica isist Abisi Abisi Abisi Abisi Abisi b	1010 10191 15910 19111 1901 1901	
11223 BLOOMII TAMPA FL 336		11223 BLOOMINGTON TAMPA FL 33635-1523	11223 BLOOMINGTON DR. TAMPA FL 33635-1523				
						Date of Last Report	
	lace of Business	2a. Mailing Address			4. FEI Number	Applied For	
21		26			59-3114897	Not Applicable	
Suite, Apt	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	0	City & State			& Floation Compaign Financian		
23		28			Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zιρ	Country	Zıp	Cou	intry	8. This corporation has liability for intang		
24	25	29	30			□No	
	9. Name and Address of Cur	rent Registered Agent			10. Name and Address of New Register	ed Agent	
	KINS, CARL T CPA			81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
TAM	PA FL 33834			20			
				83			
				84 City		85 Zip Code	
41 Dogganast	In the previous of Captions COT 6	2000 and 007 4000 Charles Or	-1 11			L 63 Zip Code	
office or r	egistered agent, or both, in the St	ate of Florida, Such change w	atutes, ine a as authorize	oove-named d by the corp	corporation submits this statement for the purpos- poration's board of directors. I hereby accept the a	e of changing its registered appointment as registered	
		oligations of, Section 607.0505	, Florida Sta	utes.			
SIGNATURE	nie . Špod or prink dinarec of Rigistered	Popul and bile it sectionals	NOTE: Bosisters	d Anant elepahus	required when reinstaling) DAT		
12.		AND DIRECTORS	13.	a Agent signature	ADDITIONS/CHANGES TO OFFICERS /		
1014	D	DELETE	1.1 T(	TLE	PT	Change Addition	
NAME	SUH, KYU Y		1.2 N	VME	• 7.		
STREET ADDRESS	11223 BLOOMINGTON DR.		1.3 \$	reet address			
City - St - ZiP	TAMPA FL 33635		1.4 CI	TY-ST-ZIP			
THEE		DELETE	2.1 TI			Change Addition	
NAME			2.2 N	AME			
STREET ADDRESS			2.3 \$1	REET ADDRESS		•	
CHY+S1-7IP			2 40	11Y - ST - ZIP	<u></u>		
1000		☐ DELETE	3.1 TI	TLE		Change Addition	
NAME			3.2 NJ	AME .	1		
STREET ADDRESS			3.3 \$1	REET ADDRESS			
CHY-ST-7IP		<del></del>		ITY - ST - ZIP			
1016		☐ DELETE	41 TI	}	1	Change Addition	
NAME			4.2 N	1			
STREET ADDRESS				REET ADDRESS			
City - St - ZiP Titte		DELETE		TY-ST-ZIP		[ ] A [ ] 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
		☐ nertit	51 TI	i		Change Addition	
NAME Process Augoree			5.2 N/	i			
STREET ADORESS			1	REET ADDRESS			
CITY - S1 - ZIP		DELETE	5.4 CI	TY-ST-ZIP		Change Addition	
NAME		_ otter	62 N			CT Only CT Madition	
STEFF LADORESS				REET ADDRESS			
CITY-ST ZIP				TY-ST-ZIP			
14. Ldo berek	by centry that the information supp	blied with this filing does not a	ualify for the	exemption st	tated in Section 119.07(3)(i), Florida Statutes. I fur	ther certify that the	
intormatio Lam an o	on indicated on this abbual report o	or supplemental annual report i or the receiver or trustee emp	is true and a powered to a	has atempor	that my signature shall have the same legal effective eport as required by Chapter 607, Florida Statutes	t ac if mada undar anthotha	

SIGNATURE:

SIGNATURE AND LYPED OR PRINTED NAME OF SIGNING OFACEPOR DIRECTOR

w/r/p7 GB) ALS-0504

**FILED** 

Apr 09 1997 8:00am

Secretary of State

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