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

PROFIT **CORPORATION ANNUAL REPORT** 1997

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 16 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPÓRATIONS

DOCUMENT # P93000044135 (0)

GOLD MEDAL COMMERCIAL CLEANING INC.

Principal Place of Business Mailing Address 1072 NORTHEAST 176TH TERRACE 1072 NORTHEAST 176TH TERRACE N. MIAMI BEACH FL 33162 N. MIAMI BEACH FL 33162-1204 3. Date Incorporated or Qualified 3a. Date of Last Report 06/23/1993 08/16/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0407413 26 ✓ Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Zio Country Country 8. This corporation has liability for intangible tax under s. 199.032, 25 29 Florida Statutes ☐ Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name JACKSON, KAREN 1072 NORTHEAST 176TH TERRACE 82 Street Address (P.O. Box Number is Not Acceptable) N. MIAMI BEACH FL 33162 83 64 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13 TITLE DELETE 1.1 TITLE Change Addition NAME JACKSON, KAREN 1.2 NAME STREET ADDRESS 1072 NE 176TH TERRACE 1.\$ STREET ADDRESS **NORTH MIAMI BEACH FL 33162** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 2 1 TITLE Change Addition NAME PAUL, TANGELA 2.2 NAME 1430 NW 138TH ST STREET ADDRESS 2.3 STREET ADDRESS NORTH MIAM! FL 33167 CITY-ST-ZIP 2. I CITY - ST - ZIP DELETE TITLE Change Addilion 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CHY-S1-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. ₽ NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE . 5.1 THUE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-S1-ZiP DELE1E TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

64 CITY-ST-ZIP 14. I do 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.