-- COND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999

2. Principal Place of Business

Suite, Apt. #, etc.

SIGNATURE\(

City & State

Zip



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF GORPORATIONS

DOCUMENT # P9300063914 i

Country

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E & A JANITORIAL INCORPORATED

Principal Place of Business

1232 LAWRENCE AVE
1232 LAWRENCE AVE
1232 DELTONA FL 32725

DELTONA FL 32725

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2a. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

## FILED Jul 19, 1999 8:00 am Secretary of State

07-19-1999 90007 045 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional

- Fee Required

\$5.00 May Be

Added to Fees

☐ No

**■**3\*

Not Applicable

3. Date Incorporated or Qualified

5. Certificate of Status Desired

Trust Fund Contribution

Election Campaign Financing

Intangible Personal Property.

This corporation owes the current year

09/14/1993 4. FEI Number

59-3198293

Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent		
			81	N:	lame	
OSOFSKY, LEONARD 302 RACHELLE AVE SANFORD FL 32771			82	82 Street Address (P.O. Box Number is Not Acceptable)		
			83	, <del></del>		
			84	1-	City 85 Zip Code	
			04		FL 10 Ep 5555	
office or	t to the provisions of sections 607.0502 and 607.1506 registered agent, or both, in the State of Florida. Suc am familiar with, and accept the obligations of, section	ch change was auth	orized by	y the	med corporation submits this statement for the purpose of changing its registered a corporation's board of directors. I hereby accept the appointment as registered	
SIGNATURE	Signature, typed or printed name of registered agent and title if applicab	le (NOTE:	Registered A	Agent	signature required when reinstating) DATE	
12.	OFFICERS AND DIRECTOR		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	DELETE	1.1 TITLE		Change Addition	
NAME	ELY, DENA		1.2 NAME		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition  ORESS	
STREET ADDRESS	1232 LAWRENCE AVE		1.3 STREET	T ADD	PRESS	
CITY-ST-ZIP	DELTONA FL 32725		1.4 CITY-ST	T-ZIP		
TITLE		DELETE	2.1 TITLE		Change Addition	
IAME			2.2 NAME			
TREET ADDRESS			2.3 STREET	T ADDI	PRESS	
CITY-ST-ZIP			2.4 CiTY-S	T-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition	
IAME		_	3.2 NAME			
TREET ADDRESS	·		3.3 STREET	T ADD	PRESS	
JTY-ST-ZIP			3.4 CITY-S	iT-ZIP	.	
ITLE		DELETE	4.1 TITLE		Change Addition	
IAME			4.2 NAME			
TREET ADDRESS			4.3 STREET	TADD	PRESS	
ity-st-zip			4.4 CITY-S	T-ZIP		
TTLE		DELETE	5.1 TITLE		Change Addition	
AME			5.2 NAME		}	
TREET ADDRESS			5.3 STREET	T ADD	PRESS	
CITY-ST-ZIP		<u></u>	5.4 CITY-S	T-ZIP		
ITLE		DELETE	6.1 TITLE		Change Addition	
AMÉ			6.2 NAME			
STREET ADDRESS			6.3 STREET	T ADD	PRESS	
CITY-ST-ZIP			6.4 CITY-S			
indicated of an officer	on this conveil const or supplemental appual const i	s true and accurate e empowered to ex	and that	f mus.	ated in section 119.07(3)(i), Florida Statutes. I further certify that the information signature shall have the same legal effect as if made under oath; that I am poort as required by Chapter 607, Florida Statutes and that my pame appears	

Country

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HADANGOU JACOSSS P9300063914 TO Whan it may Concern I Den Eleg Mored Achook # 2398 Daled April 20,1999 For thopmount of \$ 15000 for corporation Annual Ropers 100 ly in the mail I received a Second Notice (July 6) ASKing For \$ 550.00 for Filing Fee. I Calles your office And to the have not get received my Phymant Iwas Aduse to pesubmit my payment t white an touty + was submitting it at this time again. Voir office Aduseme that if it's not by now it must have been lost in he Checkwith hopes that this later turker Delay Will be made P9.300063914 awono: Ave

590389-9007-45