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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

200000005 4 (E)

DOCUMENT # P93000080654 (5) ST. PETE MAINTENANCE, INC.

Principal Place of Business Mailing Address 2901 34TH ST N 2901 34TH ST N ST PETERSBURG FL 33713 ST PETERSBURG FL 33713 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 11/16/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3210273 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Regulred City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible ☐ Yes □ Ño 24 25 Personal Property Tax due June 30. 29 30 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent MEAGHER, M B 2901 34ST N Street Address (P.O. Box Number is Not Acceptable) ST PETERSBURG FL 33713 83 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) DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change ☐ Addition TITLE 1.1 TITLE MEAGHER, MICHAEL NAME 1.2 NAME 2901 34TH ST N 1.3 STREET ADDRESS STREET ADDRESS ST PETERSBURG FL 33713 1.4 CITY-ST-ZIP CITY - ST - ZIP Change DELETE Addition TITLE 2.1 TITLE SOULLIERE, GREGORY NAME 2.2 NAME 2901 34TH ST N STREET ADDRESS 2.3 STREET ADDRESS ST PETERSBURG FL 33713 CITY-ST-ZIP 2. 4 CITY - ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST-ZIP DELETE Change Addition 4.1 Title TITLE 4.2 NAME HAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY - ST - ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE ☐ Change ☐ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 this 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 proper attraction with an address.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

MURE REQUIRETING

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FILED

Jan 15 1998 8:00am

Secretary of State

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