

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

**PROFIT
CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 JUL 19 AM 9:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000085174 (9)

1. Corporation Name

LURIC JANITORIAL & MAID SERVICE, INC.

Principal Place of Business

**757 SOUTHEAST 22ND DRIVE
HOMESTEAD FL 33033**

Mailing Address

**757 SOUTHEAST 22ND DRIVE
HOMESTEAD FL 33033**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **01/04/1994** 3a. Date of Last Report

4. FEI Number **65-0455890** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Tax Year (calendar year or fiscal year) ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.12(2), Florida Statutes. ☐ Yes ☒ No

2. Principal Place of Business

21. State Apt. # etc.

22. City & State

23. Zip

24. Country

2a. Mailing Address

26. State Apt. # etc.

27. City & State

28. Zip

29. Country

2b. Mailing Address

27. State Apt. # etc.

28. City & State

29. Zip

30. Country

9. Name and Address of Current Registered Agent

**THE LAW FIRM OF LAWRENCE J. SPIEGEL CHTRD
343 ALMERIA AVENUE
CORAL GABLES FL 33134**

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83. City

84. State

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607 (Part) and 607.15(2)(b), 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 this appointment as registered agent. I am familiar with and accept the obligations of law from 607.15(2)(b), Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of President or Officer

12. OFFICERS AND DIRECTORS		13. ADDITIONAL OFFICERS AND DIRECTORS	
NAME		NAME	P/T/D ☐ Change ☒ Addition
Street Address		Street Address	
City		City	
State		State	
Zip		Zip	
NAME		NAME	☐ Change ☒ Addition
Street Address		Street Address	
City		City	
State		State	
Zip		Zip	
NAME		NAME	☐ Change ☐ Addition
Street Address		Street Address	
City		City	
State		State	
Zip		Zip	
NAME		NAME	☐ Change ☐ Addition
Street Address		Street Address	
City		City	
State		State	
Zip		Zip	
NAME		NAME	☐ Change ☐ Addition
Street Address		Street Address	
City		City	
State		State	
Zip		Zip	
NAME		NAME	☐ Change ☐ Addition
Street Address		Street Address	
City		City	
State		State	
Zip		Zip	
NAME		NAME	☐ Change ☐ Addition
Street Address		Street Address	
City		City	
State		State	
Zip		Zip	

14. I, the undersigned, certify that the information required with this filing is substantially true and correct and that the corporation is in good standing under the laws of the State of Florida. I further certify that the information indicated on this annual report or supplemental annual report is true and correct and that my signature shall have the same legal effect as if made under oath. That I am eligible to act as the registered agent of this corporation or the receiver or holder empowered to accept the report as required by Chapter 607, Florida Statutes, and that my name appears on Block 13 of this report as changed or new, as the case may be, with my address.

SIGNATURE: Eric G. Griffiths, President 7/18/95 (305)230-0046
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/95)

7000001545377
-07/25/95--01123--004
****225.00 ****225.00

7/19/95
WST