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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9400003310 (7)

## D & D CONSTRUCTION CLEANING, INC.

**FILED** Feb 12 1997 8:00am Secretary of State



District Description										
Principal Place of Business Mailing Address						*****		•••••		
P.O. BOX 8178 HOLLYWOOD F		P.O. BOX 817804 HOLLYWOOD FL 33061-1804	•	•						
US		U\$				Date Incorporated or Qualified 01/13/1994	3a. Date 03/29		eport	
2. Principal P	Place of Business	2a. Mailing Address				4. FEI Number	1 00/20		plied For	
21 26			•			59-2600972			t Applicable	
Suite, Apt	4 5W 50th ROA	Suite, Apl. #, etc.	Suite, Apl. #, etc.			5. Certificate of Status Desired				
City & Stat	LAUDERDALE, 71	City & State								
Zip	Country	Zip	Countr	у		B. This corporation has liability for in	ntangible ta	x under s	199.032,	
24 33	3/4 25 DROWAR	D 29	30			1	Yes 🔲			
	9. Name and Address of Curren	it Registered Agent				10. Name and Address of New Reg	istered Ag	ent		
DAV	1S, SHAW M. CPA		81	Nan	ne	•				
2131 HOLLYWOOD BOULEVARD				Stre	reet Address (P.O. Box Number is Not Acceptable)					
	TE 204		82	] 5	CI MOOI 6	65 (F.O. DOX Humber is 1401 Acceptable	,0,			
HOLLYWOOD FL 33020										
			84	City			FL	85 Zip (	Code	
office or r	registered agent, or both, in the State	ro! Florida. Such change was ai	uthorized b	v the c	ed corpo orporatio	ration submits this statement for the prin's board of directors. I hereby accep	urpose of ch t the appoin	nanging it itment as	s registered registered	
	am lamiliar with, and accept the obliga	ations of, Section 607.0505, Flor	rida Statute	<b>1</b> \$.					-	
SIGNATURE	Signature, typed or printed name of registered age			ent signa	ture required	d when reinstating)	DATE			
12.	OFFICERS ANI		13.			ADDITIONS/CHANGES TO OFFIC				
TITLE	D	DELETE	1.1 TITLE				L.	Change	Addition	
NAME	DEIGNAN, LAVONNE		1.2 NAME							
STREET ADDRESS	3134 SW 50 ROAD		1.3 STREE	T ADDRE	s					
CITY-ST-ZIF	FORT LAUDERDALE FL	T ner Fre	1.4 CITY	ST-ZIP				T 0.		
TITLE		☐ DELETE	21 TITLE				L	J Change	Addition	
NAME			2.2 NAME		1					
STREET ADDRESS			2.3 STREE	T ADDRES	S					
CITY - ST - ZIP			2.4 CITY	ST-ZIP		·		<b></b>		
TITLE		☐ DELETE	3.1 TITLE		'		'' L	Change	Addition	
NAME			3.2 NAME							
STREET ADDRESS			3.3 STREE	T ADDRE	s					
City-St-ZiP		T1 25.22	3.4. CITY	\$1- <i>I</i> 1P			·	1		
TITLE		DELETÉ	4.1 TIFLE		-		L	Change	Addition	
NAME			4. 2 NAM							
STREET ADDRESS			4.3 STREE	1 ADDRE	s					
CITY-ST-ZIP			4.4 CITY -	ST - ZIP				1 6.		
THLE		DELETE	5.1 TITLE				L.,	Change	Addition	
NAME			5 2 NAME							
STREET ADDRESS			5 3 STREI	T ADDRE	is					
City - St - 7iP			54 CITY-	S1-21P					_ <u></u>	
TITLE		☐ DELETE	6 1 TITLE					] Change	Addition	
NAME			6.2 NAME							
STREET ADDRESS	]		6.3 STREE	T ADDRE	s					
CHY-ST-7/P			6.4 CITY-	ST-71P	l					

14. If 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 of the corporation of the receiver of the re appears in Block 12 or Block 13