## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name

P94000014646 (1)

T & H CLEANING INC.

Principal Place of Business Mailing Address 10202 VANDERBILT DRIVE



NAPLES FL 33963		NAPLES FL 33963					
					3. Date Incorporated or Qualified 02/21/1994	3a. Date of L	ast Report 3/1995
	ace of Business	2a. Mailing Address			4. FEI Number	L.,,,,,,,	Applied For
21		26		20-6102001		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$	8.75 Additional Fee Required	
City & State	)	City & State			Election Campaign Financing     Trust Fund Contribution		5.00 May Be Added to Fees
Zip 24	Country 25	Zip <b>29</b>	Country 30	,	8. This corporation has liability for in Florida Statutes Yes		der s. 199.032,
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Ro	egistered Age	nt
			81	Name			
STOLLERY, BRIAN 10202 VNDERBILT DRIVE			82	Street A	Address (P.O. Box Number is Not Acceptabl	e)	
	S FL 33963		83				
			84	City		E1 85	Zip Code
SIGNATURE _	o the provisions of Sections 607.050 ed agent, or both, in the State of Fio th, and accept the obligations of, Sec Signatur, byied or printed name of nightered agri				rporation submits this statement for the purp board of directors. Thereby accept the appo	pose of changin intment as regis	g its registered office stered agent. I am
12.	The state of the s	ND DIRECTORS	13.	it ziñietra.e.e	ADDITIONS/CHANGES TO OFFIC		ECTORS IN 12
TITLE	PT	DELETE	1. 1 TITLE	I			
NAME	STOLLERY, BRIAN	<del></del>	1.2 NAME				
STREET ADDRESS	10202 VANDERBILT DRIVE NAPLES FL			ADDRESS			
CITY-ST-ZIP	VPS TL	Fig refere	1.4 CITY - 1	ST-ZIP			
TITLE	MILLNER, JANET	DETEJE	2. 1 TITLE	ł		Cr	nange 🗀 Addition
NAME Street address	10202 VANDERBILT DRIVE		2 2 NAME 2 3 S!REE	ADDRESS			
ÇITY-ST-ZIP	naples fl		2.4 CHY-	ST - ZIP			
TITLE		[] DELETE	3. 1 TITLE			□ CF	ange 🛅 Addition
NAME			3 2 NAME				
STREET ADDRESS			3.3 STREE	ADDRESS			
CITY-ST-ZIP			3 4 CITY - 5	II - ZIP			
TITLE		DELETE	4. 1 TITLE			Cr	iange 🔲 Addition
NAME			4.2 NAME				
STREET ADDRESS			4.3 STREE	ADDRESS			
CITY - ST - ZIP		□ priete	4.4 CITY - 5	I - ZIP			
TITLE		DELETE	5. 1 TITLE			CH	ange 🗌 Addition
NAME			5 2 NAME				
STREET ADDRESS			53 STREET				
CITY-ST-ZIP TITLE		["] DELETE	5.4 CITY-S	1-7P			2020
		[] DECEIG	6 1 TITLE	İ		☐ Ch	iange 🔲 Addition
NAME STREET ADDRESS			6.2 NAME	15555			
			6.3 STREET	1			1
City-St-Zi <sup>o</sup> 14. Ldo hereby	vertify that the information supplied	with this filing is voluntarily furnis	64 CHY-S		ify for the exemption stated in Section 119.0	17/3Vk) Etorida	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.

Buan Stolley BRIAD STOLLERY

9911 - 592-6196 Daytme Phone #