

SECOND 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



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P94000015051** ✓
Corporation Name

I & M MAINTENANCE, INC.

FILED
Sep 07, 1999 8:00 am
Secretary of State

09-07-1999 90011 037 ***550.00



Principal Place of Business
~~NW 4TH ST.~~
MIAMI FL 33125

Mailing Address
~~2255 N.W. 4TH ST.~~
MIAMI FL 33125

DO NOT WRITE IN THIS SPACE

Principal Place of Business 121 NW 18 COURT		2a. Mailing Address 121 NW 18 COURT		3. Date Incorporated or Qualified 02/24/1994	
Suite, Apt. #, etc. MIAMI FL		Suite, Apt. #, etc. MIAMI FL		4. FEI Number 65-0471392	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 33125		Zip 33125-3322		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Country MIAMI-DADE		Country MIAMI-DADE		8. This corporation owes the current year Intangible Personal Property. <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent MARANTE, JUAN J 2255 N.W. 4TH ST. MIAMI FL 33125				10. Name and Address of New Registered Agent	
				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable) 121 NW 18 COURT	
				83 MIAMI FL 33125-3322	
				84 City FL 85 Zip Code	

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

OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
E	PSD MARANTE, JUAN J 2255 N.W. 4TH ST. MIAMI FL 33125	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
E		1.2 NAME	MARANTE, JUAN J
E		1.3 STREET ADDRESS	121 NW 18 COURT
E		1.4 CITY-ST-ZIP	MIAMI FL 33125-3322
E	TD MARANTE, CARIDAD C 2255 N.W. 4TH ST. MIAMI FL 33125	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
E		2.2 NAME	MARANTE, CARIDAD C
E		2.3 STREET ADDRESS	121 NW 18 COURT
E		2.4 CITY-ST-ZIP	MIAMI FL 33125-3322
E		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
E		3.2 NAME	
E		3.3 STREET ADDRESS	
E		3.4 CITY-ST-ZIP	
E		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
E		4.2 NAME	
E		4.3 STREET ADDRESS	
E		4.4 CITY-ST-ZIP	
E		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
E		5.2 NAME	
E		5.3 STREET ADDRESS	
E		5.4 CITY-ST-ZIP	
E		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
E		6.2 NAME	
E		6.3 STREET ADDRESS	
E		6.4 CITY-ST-ZIP	

I 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 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.

SIGNATURE:

JUAN MARANTE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/15/1999
Date

305-541-3279
Daytime Phone #

CR2E034 (5/99)