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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

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| | | | |

DOCUMENT #

P94000025876 (1)

BERGSTRESSER CLEANING SARASOTA INC.

Principal Place of Business
3607 38TH AVENUE WEST

Mailing Address

3607 38TH AVENUE WEST RRADENTON EL 34206



| BRADENTO | N FL 34205 | | BRADENTON | i FL 34206 | , | | | | | |
|--|------------------------------|---|---------------------------------|---------------|---|---|--|---------------------------------------|---------------------------|--------------------------------|
| | | | | | | | 3. Date Incorporated or Qualified | 3a. Date of La | | |
| | | | | | | | 04/04/1994 | 05/0 | | |
| 2. Principal Plac | | | 2a. Mailing Addr | | 3 | | 4. FEI Number | • | | oplied For |
| 21 2080 | GARL | EN LANE | 26 2080 Suite, Apt. # | GH | COEN | LANC | 65-0520642 | | | ot Applicable |
| Suite, Apt. # | , etc. | | | , etc. | | | 5. Certificate of Status Desired | 1 1 7 - | - | Additional equired |
| City & State | | | City & State | | | | 6. Election Campaign Financing | | | _ |
| BRAD | |) FL | | 1 | | 5 6 | | | 5.00 May Be Added to Fees | |
| Zip | GIV I UN | Country | Zip | 1010 | Cour | ntry | 8. This corporation has liability for it | ntangible tax unc | lor s | 99.032, |
| 4 3420 | 05 | 25 MANATES | 29 34203 | 5 | 30 MA | NATEL | Florida Statutes Yes | | | |
| | 9. Name | and Address of Currer | | | | | 10. Name and Address of New R | egistered Agen | t | |
| | | | | | | 81 Name | | | | |
| BERGSTRESSER, SAMUEL D 3607 38TH AVE. WEST | | | - | 82 Street Add | iress (P.O. Box Number is Not Acceptab | le) | | | | |
| | | | | 02 | | Officer Add | 1055 (-10-20-10-10-10-10-10-10-10-10-10-10-10-10-10 | , | | |
| | NTON FL | | | | Ī | 83 | | | | |
| 0.0.01 | | V 1244 | | | - | 84 City | | 85 | Zin | Code |
| | | | | | | | | FL I | | |
| 11. Pursuant to | o the provision | ons of Sections 607.050 | and 607,1508, Floric | la Statutes | s, the above | ve-named corpo | oration submits this statement for the pur ard of directors. I hereby accept the appo | pose of changing pintment as regis | g its re tered | gistered office agent. i am |
| familiar witt | ed agent, or h, and accer | ot the obligations of, Sec | tion 607,0505, Florida | Statutes | а Бу пес | orporation s doc | ard of directors. Thereby boocht the appr | omanione as regio | | agona ram |
| SIGNATURE | | | | | | | | | | |
| | Signature, typed | or printed name of registered again | | (NOT | | Agent signature requir | | DATE | CTO | 20 141 20 |
| 12. | | OFFICERS AN | D DIRECTORS | ETE | 13. | 1. E | ADDITIONS/CHANGES TO OFF | CENS AND DIN | | Addition |
| TITLE | D | OTDECOED 04441E1 | | LIL | 1.2 NA | | | | o. igo | |
| NAME | | stresser, samuel 38th ave. West | U | | | REET ADDRESS | | | | |
| STREET ADDRESS | | ENTON FL 34205 | | | | TY-ST-ZIP | | | | |
| CITY-ST-ZIP TITLE | DIVAL | ENTON FL 34203 | T DEI | ETE | 2.11 | | | [7] Ch | ange | Addition |
| NAME | | | ٠ ب | | 2.2 NA | | | | · - | _ |
| | | | | | | | | | | |
| | | | | | 23.51 | REEL ADDRESS | | | | |
| STREET ADDRESS | | | | | | TY-SI-7IP | | | | |
| | | | ☐ DFI | ETE | | TY-ST-ZIP | | Ch | ange | Addition |
| STREET ADDRESS CITY-S1-ZIP | | | DFI | ETE | 2.4 CI | TY-ST-ZIP | | ☐ CH | ange | Addition |
| STREET ADDRESS GITY-S1-ZIP TITLE NAME | | AND | □ DEI | ETE | 2.4 Cf 3. 1 Ti 3.2 N/ | TY-ST-ZIP | | CH | ange | Addition |
| STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS | | | DF1 | £TE | 2.4 Cf 3. 1 Ti 3.2 NA 3.3 S | TY-ST-ZIP ITLE 4ME | | Ch | ange | Addition |
| STREET ADDRESS GITY-S1-ZIP TITLE NAME | | | DE1 | | 2.4 Cf 3. 1 Ti 3.2 NA 3.3 S | TY-ST-ZIP ITLE AME TREET AODRESS ITY-ST-ZIP | | Ch | | Addition Addition |
| STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP | | | | | 2.4 CI 3. 1 TI 3.2 N/ 3.3 S 3.4 CI | TY-S1-ZIP IILE AME TREE1 ADDRESS IIY-S1-ZIP IILE | | | | |
| STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE | | | | | 2.4 Ci 3. 1 Ti 32 N/ 33 S 3.4 Ci 4. 1 Ti 4.2 N/ | TY-S1-ZIP IILE AME TREE1 ADDRESS IIY-S1-ZIP IILE | | | | |
| STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | | | | | 2.4 Ct 3. 1 Tt 3.2 N/ 3.3 S 3.4 Ct 4. 1 Tt 4.2 N/ 4.3 St | TY-S1-ZIP IIILE AME TREE1 ADDRESS IIY-S1-ZIP IILE AME | | [] Ct | ange | ☐ Addition |
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| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | □ D€ | LETE | 2 4 Ci 3 1 Ti 32 N/ 33 S 34 Ci 4 1 Ti 42 N/ 43 Si 44 C- 5 1 T 52 N/ 53 Si 54 Ci | TY-SI-ZIP IIILE AME IREEI ADDRESS IIY-SI-ZIP IIILE AME IREEI ADDRESS ITY-SI-ZIP IIILE AME IREEI ADORESS ITY-SI-ZIP IIILE | | Cr | ange nange | ☐ Addition ☐ Addition |
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 logal effect as if made under coath; 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.
SAM BERGS TRESSER

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-24-96 (941) 758619
Date Daytime Proce #