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May 01, 1999 8:00 am Secretary of State

05-01-1999 90048 028 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P9400050929

1. Corporation Name

PROFESSIONAL CLEANING SERVICES OF SOUTH FLORIDA, INC.

INC.			•		
Principal Place	e of Business	Mailing Address		1 (30)124) (10 15)11 8 (81) 98(1) 98(1)	31(1 88(2) E(11) 681(8 1911 11616 1917 199)
1601 ASBURY T BOYNTON BCH US		1601 ASBURY WAY BOYNTON BCH FL 33426 US		DO NOT WRITE	IN THIS SPACE
				<ol> <li>Date Incorporated or Qualified</li> <li>07/05/1994</li> </ol>	
2 Principal D	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
	38 W. LANTANA	26 1438 W. Lan	tran Rd.	65-0504695	Not Applicable
Suite, Apt.		Suite, Apt. #, etc. 27 # 42.7	<u> </u>		\$8.75 Additional Fee Required
City & Stat	<u> </u>	City & State	<u> </u>	6. Election Campaign Financing	\$5.00 May Be
23 Lan	Jana 71.	28 Lantana	. F1.	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current	
24 <u>331</u>	102 25	29 33462 30	<u> </u>	Personal Property Tax.	Yes No
	9. Name and Address of Current F	Registered Agent	81 Name	10. Name and Address of New Reg	Istered Agent
DEG	EORGE, SHEILA R				· · · · · · · · · · · · · · · · · · ·
	ASBURY WAY		82 Street Ad	ddress (P.O. Box Number is Not Acceptable	)
BOY	'NTON BCH FL 33426		83		
			84 City		85 Zip Code
					FL   i
office or r	to the provisions of Sections 607.0502 a registered agent, or both, in the State of im familiar with, and accept the obligatio	Florida, Such change was auth	ionized by the corpora	orporation submits this statement for the puration's board of directors. I hereby accept the	rpose of changing its registered ne appointment as registered
agent, i a	in lanimar with, and accept the congeno	ris di, Section 607.0303, Fibria	a Statutes.	•	
SIGNATURE	-			uired when reinstating)	DATE
SIGNATURE	Signature, typed or printed name of registered agent a  OFFICERS AND	nd title if applicable. (NOTE: Re	egistered Agent signature req	uired when reinstating)  ADDITIONS/CHANGES TO OFFIC	
•	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE: Re	egistered Agent signature req		
SIGNATURE	Signature, typed or printed name of registered agent a OFFICERS AND	nd title if applicable. (NOTE: Re	egistered Agent signature req	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
SIGNATURE  12.  TITLE	Signature, typed or printed name of registered agent a OFFICERS AND	nd title if applicable. (NOTE: Re	ogistered Agent signature req	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12  Change Addition
SIGNATURE  12.  TITLE  NAME	Signature, typed or printed name of registered agent a OFFICERS AND P DEGEORGE, SHEILA R	nd title if applicable. (NOTE: ReDIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12  Change Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS	Signature, typed or printed name of registered agent a OFFICERS AND P DEGEORGE, SHEILA R 180 YACHT CLUB WAY 5-104	nd title if applicable. (NOTE: Re	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12  Change Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Signature, typed or printed name of registered agent a OFFICERS AND P DEGEORGE, SHEILA R 180 YACHT CLUB WAY 5-104	nd title if applicable. (NOTE: ReDIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12  Change Addition
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SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agent a OFFICERS AND P DEGEORGE, SHEILA R 180 YACHT CLUB WAY 5-104	nd title if epplicable. (NOTE: ReDIRECTORS)  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12  Change Addition
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered agent a OFFICERS AND P DEGEORGE, SHEILA R 180 YACHT CLUB WAY 5-104	nd title if applicable. (NOTE: ReDIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12  Change Addition  Change Addition
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SIGNATURE  12.  TITLE  NAME  STREET ADDRESS: CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS CITY-ST-ZIP  TITLE	Signature, typed or printed name of registered agent a OFFICERS AND P DEGEORGE, SHEILA R 180 YACHT CLUB WAY 5-104	nd title if epplicable. (NOTE: ReDIRECTORS  DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12  Change Addition  Change Addition
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14. 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 receive 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 chapted, or on an attachment with an address, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

56/3734719

Addition