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Apr 22 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000056214 (7)

1. Corporation Name

HOME MAINTENANCE SERVICE, INC.



Principal Place of Business

Mailing Address

4014 CHASE AVE.
SUITE 202
MIAMI BEACH FL 33140

P. O. BOX 402621
MIAMI BEACH FL 33140-0621

3. Date Incorporated or Qualified
07/29/1994

3a. Date of Last Report
07/10/1996

2. Principal Place of Business

21 4014 Chase Avenue

2a. Mailing Address

26

Suite, Apt. #, etc.

22 Suite 203

Suite, Apt. #, etc.

27

City & State

23 Miami Beach, FL

City & State

28

Zip

24 33140

Country

25 Dade

Zip

29

Country

30

4. FEI Number

65-0202266

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s 199.032,
Florida Statutes

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

SILVERMAN, JACK
3980 OAKS CLUBHOUSE DR.
BLDG. 79, APT. 408
POMPANO BEACH FL 33069

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. 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, type or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PS
NAME SILVERMAN, JACK
STREET ADDRESS 3980 OAKS CLUBHOUSE DR., BLDG. 79, APT 408
CITY-ST-ZIP POMPANO BEACH FL 33069

☐ DELETE

TITLE VT
NAME SILVERMAN, SYLVIA
STREET ADDRESS 3980 OAKS CLUBHOUSE DR., BLDG. 79, APT 408
CITY-ST-ZIP POMPANO BEACH FL 33069

☐ DELETE

TITLE
NAME
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CITY-ST-ZIP

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CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-16-97 (305) 532-2565

CR2E034 (9/96)