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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 # P94000056786 (4)

1. Corporation Name

CHAMPIONSHIP INDUSTRIAL CLEANING, INC.

Principal Place of Business

5126 ASHLEY LAKE DR.
#7-35
BOYNTON BEACH FL 33437

Mailing Address

5126 ASHLEY LAKE DR.
#7-35
BOYNTON BEACH FL 33437-3164



3. Date Incorporated or Qualified
07/29/1994

3a. Date of Last Report
07/09/1996

4. FEI Number

65-0515411

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

2. Principal Place of Business

21 3547 BROOKLYN LN.

Suite, Apt. #, etc

22 City & State

23 LAKE WORTH - FL

24 Zip

33461

Country

25 USA

2a. Mailing Address

26 3547 BROOKLYN LN.

Suite, Apt. #, etc

27 City & State

28 LAKE WORTH - FL

29 Zip

33461

Country

30 U.S.A

9. Name and Address of Current Registered Agent

WILCOX, VILMA A
5126 ASHLEY LAKE DR.
#7-35
BOYNTON BEACH FL 33437

10. Name and Address of New Registered Agent

81 Name

82 VILMA A. WILCOX

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

3547 BROOKLYN LN.

84 City

LAKE WORTH

FL

85 Zip Code

33461

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

Vilma A. da Silva Wilcox

VILMA A. DA SILVA WILCOX - DIRECTOR

04-15-97

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
WILCOX, VILMA A
STREET ADDRESS
5126 ASHLEY LAKE DR., #7-35
CITY - ST - ZIP
BOYNTON BEACH FL 33437

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME
VILMA A. WILCOX
1.3 STREET ADDRESS
3547 BROOKLYN LN.
1.4 CITY - ST - ZIP
LAKE WORTH - FL 33461

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:

Vilma A. da Silva Wilcox

VILMA A. DA SILVA WILCOX

4-15-97

(561) 966-1860

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)