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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400062328 (7)

MAID TO ORDER CLEANING SERVICES, INC.

Principal Place of Business

Mailing Address

FILED

Apr 25 1997 8:00am

Secretary of State

10809 NW 46 D CORAL SPRING		10909 NW 46 DR. Coral Springs FL 3307	10809 NW 46 DR. CORAL SPRINGS FL 33076-2131					
					3. Date Incorporated or Qualified 08/24/1994	3a. Date of Li 05/01/19	'	
iı	ace of Business	2a. Mailing Address	Mailing Address		4, FEI Number		Applied For	
21		26			65-0513384	5-0513384 Not Applicable \$8.75 Additional		
Suite Apt 4	# etc.	Suite, Apt. #, etc.	27		5. Certificate of Status Desired	□ Fe	Fee Required	
City & State		City & State	 		Election Campaign Financing Trust Fund Contribution	Added to Fees		
7(p	Country 25	Zip 29	Countr 30	У	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes \square No			
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
DAU	IKISSOON, NARASHE		8	Name				
10909 NW 46 DR. CORAL SPRINGS FL 33076			8:	2 Street Add	Street Address (P.O. Box Number is Not Acceptable)			
			83	3				
			8-			FLII	Zip Code	
11. Pursuant t	to the provisions of Sections 607.	0502 and 607.1508, Florida Statu	les, the abo	ve-named cor	rporation submits this statement for the pation's board of directors. I hereby accep	urpose of chang	ing its registered	
agent La	m familiar with and accept the of	bligations of, Section 607.0505, Fl	orida Statut	es.	KZ	100/64	, as regional	
SIGNATURE	Manlessa					10/17/		
	Signature, typed or printed name of registered			gent signature requ	ulred when reinstating)	DATE	OTODE IN 10	
12.		AND DIRECTORS DELETE	13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFIC	Ch.		
14fl_F	P	L' DETELE	1.1 IIILE 1.2 NAM				mgo raomon	
NAME.	RAMKISSOON, NARASHE			ET ADDRESS				
STREET ADDRESS	10000 1117 40 011.		1.3 SINC	İ				
City ST-ZF			2 1 TITLE			Ch	ange Addition	
NAME	RAMKISSOON, ANDRA		2 2 NAMI				•	
STREET ADDRESS				ET ADDRESS	•			
CITY-S1-ZIP	CORAL SPRINGS FL 33076		2 4 CITY	1				
1006	DELETE		3.1 TITLE			Ch	ange Addition	
NAME			3.2 NAM	E				
STREET ADDRESS				ET ADDRESS		•		
CITY - S1 - ZIP			3.4. CITY		:			
THE		DELETE	4.1 TITLE			□ Ch	ange Addition	
NAME (4. 2 NAM	IE :				
STREET ADDRESS			4.3 STRE	ET ADDRESS	•			
CITY-ST-ZIP			4.4 CITY	- ST - Z(P				
TITLE		☐ DELETE	5.1 TITLE			Ch Ch	ange Addition	
NAME			5.2 NAM	Ε				
STREET ADDRESS			53 STRE	ET ADDRESS				
City-St-ZiP			5.4 CITY	- ST - ZiP			11111	
TITLE		DELETE	6.1 TITLE			[_] Ch	ange	
N4M(, 6.2 NAM	E				
STREET ADDRESS			6.3 STRE	ET ADDRESS	•			
CITY-ST-ZIP			6.4 CITY	-ST-ZIP				
14 Ldo herel	by certify that the information sup	polied with this filing does not qua	lify for the e	xemption state	ed in Section 119.07(3)(i), Florida Statute	I further certify	y 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 chapter 607 or on an attachment with an address.

SIGNATURE: