## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT

STATE Sandra B. Morths

Secretary of State

DIVISION OF CORPORA IONS

## **FILED** May 05 1997 8:00am Secretary of State

	MENT # <b>P94000</b> WINDOW CLEANING, INC.	062810 (4)	,		
Principal Place of Business Mailing Addres		Mailing Address	<del>- ,                                   </del>	1 SEDELIDES IND SOUR DIBLE ODER (0011) 501	11 80(18 6610 11891 1019) 11811 981) 1881
1180 LA MESA AVENUE WINTER SPRINGS FL 32708		1180 LA MESA AVENUE WINTER SPRINGS FL 32708-4837			
				3. Date incorporated or Qualified 08/17/1994	3a. Date of Last Report 08/27/1996
-··ı '	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21] Suite, Apt #, etc.		Suite, Apt. #, etc.		59-3263527	Not Applicable S8.75 Additional
22	F. C12.	27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zφ	Country	Zip	Country	8. This corporation has liability for i	
24	25	29	30		Yes No
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Re	gistered Agent
	RKER, RICHARD J		Name		
1180 LA MESA AVENUE WINTER SPRINGS FL 32708  82 Street Add				ddress (P.O. Box Number is Not Acceptable)	
44.07	TIEN SPRINGS FL 32/00		83		
			64 City		FL 85 Zip Code
11. Pursuant	to the previsions of Sections 607.0502	and 607.1508, Florida Statu	tes, the above-named co	rporation submits this statement for the p	purpose of changing its registered
office or t	registered agent, or both, in the State of	f Florida, Such change was	authorized by the corpora	rporation submits this statement for the pation's board of directors. I hereby accept	ot the appointment as registered
	in tarkilar with and accept the bodgat	ions (ii, section tortosos, r	orida Statules.		
SIGNATURE	Shir attrict typed or profed name of registered agent	and title if applicable. (NO	TE: Registered Agent signature requ	ulred when reinstating)	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	DV DADYED CARY I	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	PARKER, GARY J		1.2 NAME		
STREET ADDRESS	1180 LA MESA AVENUE WINTER SPRINGS FL 32708		1.3 STREET ADDRESS		ļ
City-St-7IP	DI	Decen	1.4 CITY-ST-ZIP		Colores La Addition
TITLE	PARKER, ROBERT J	DELETE	2.1 TITLE		Change Addition
NAME	1180 LA MESA AVENUE		2.2 NAME		
STREET ADDRESS	WINTER SPRINGS FL 32708		2 3 STREET ADDRESS		
CHY-S1-ZF	p	DELETE	2 4 CITY-ST-ZIP 3.1 TITLE	DP	XX Change
NAME	PARKER, RICHARD J	[] ottet	3.2 NAME	νt	*FFF AuruMe F" Vogition
STHEE! ADDRESS	1180 LA MESA AVENUE		3.3 STREET ADDRESS		
CITY: ST ZIP	WINTER SPRINGS FL 32708		3.4. CITY-ST-ZIP		
1:111		DELETE	4.1 TITLE		Change Addition
NAME			4 2 NAME		• ****
STREET ADDRESS			4.3 STREET ADDRESS		ļ
COY \$1-76°			4.4 CITY-SY-ZIP		
71116		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CHY-\$1 - ZIF			5.4 CITY - ST - ZIP		
TATUE		☐ DELETE	6.1 TITLE		Change Addition
NAME			62 NAME		
STREET ASIDRESS			6.3 STREET ADDRESS		
C41Y - S1 - ZIP	1		6.4 CITY - ST - ZIP		ļ,

14. I do hereby conify 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 eath; 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 13 if changed, or on an attachment with an address.

407-695-0465

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