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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400063107 (4)

MARY'S CLEANING SERVICE OF OCEAN REEF, INC.

23100 SW 172 CT 23100 S.W. 172ND STREET GOULDS FL 33170 **GOULDS FL 33170** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/26/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0521005 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Ζiρ Country Zip Country This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. 25 30 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name LIEBERMAN, STEVEN 9130 S. DADELAND BLVD. Street Address (P.O. Box Number is Not Acceptable) 82 **SUITE 1619** 83 MIAM! FL 33156 84 City 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, typed or printed name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change DELETE 1.1 TITLE Addition TITLE ARKIN, MARY NAME 1.2 NAME **CR2E034** 23100 S.W. 172ND ST. STREET ADDRESS 1.3 STREET ADDRESS **GOULDS FL 33170** CITY-ST-ZIP 14 CITY-ST-ZIP DELETE STD Change Addition TITLE 2.1 TITLE arkin, leslie NAME 2.2 NAME 23100 S.W. 172ND ST. STREET ADDRESS 2.3 STREET ADDRESS **GOULDS FL 33170** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Channe Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change TITLE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST- ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME

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 frue 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or par an attachment with an address.

53 STREET ADDRESS

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

5.4 City - ST - ZiP

6.1 TITLE

6.2 NAME

RICHATUDE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

Tanker (c) bo

DELETE

1-16-67

205 2425354

Change

Addition

FILED

Jan 26 1998 8:00am

Secretary of State