## 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 # P9400065506 (5)

SUNRISE CARPET CLEANING, INC.

Principal Place of Business Mailing Address 5211 SUNRISE BLVD. 5211 SUNRISE BLVD. DELRAY BEACH FL 33484-1154 **DELRAY BEACH FL 33484** 3. Date incorporated or Qualified 3a. Date of Last Report 09/01/1994 04/05/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0516045 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be п Trust Fund Contribution Added to Fees 23 28 Źφ Country Country Zio This corporation has liability for intangible tax under s. 199.032, 30 Yes No 24 25 29 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name ROBINSON, TRACEY T 5211 SUNRISE BLVD. Street Address (P.O. Box Number is Not Acceptable) **DELRAY BEACH FL 33484** 83 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 Segrange hypora or princed name of registered agent and little it applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. (96/6) DELETE Change Addition 11 TITLE TIFLE ROBINSON, BRIAN S 1.2 NAME NAME CR2E034 5211 SUNRISE BLVD. STREET ADDRESS 1.3 STREET ADDRESS DELRAY BEACH FL CITY-ST-Z-P 1.4 CITY - ST- ZIP DELETE Change \_\_\_ Addition 21 TITLE TITLE VD ROBINSON, TRACEY T. 22 NAME 5211 SUNRISE BLVD. 2.3 STREET ADDRESS STREET ADDRESS **DELRAY BEACH FL** CITY - ST - ZIP 2. 4 CITY - \$T - ZIP DELETE Change Addition 3.1 TITLE TITLE TILLEY, THOMAS E. NAM: 3.2 NAME **602 TIMBERLANE CIRCLE** 3.3 STREET ADDRESS STREET ADORESS **GREENACRES FL** 3.4. CITY-ST-ZIP DITY ST-74P Change Addition DELETE 41 TITLE TIME TILLEY, REGINA 4. 2 NAME NAME **602 TIMBERLANE CIRCLE** STREET ADDRESS 4.3 STREET ADDRESS **GREENACRES FL** CITY-ST-ZP 4.4 CITY - ST- ZIP DELETE Change ■ Addition 5.1 TITLE TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADORESS 5.4 CITY - ST - ZIP

SIGNATURE:

C-TY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME

DELETE

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS 64 CITY ST- 2IP

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 countration or the receiver or trustee empowered to execute this report as required by Chadter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an approach.

Change

Addition

**FILED** 

Jan 29 1997 8:00am

Secretary of State