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

PROFIT CORPORATION **ANNUAL REPORT**

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000076198 (8)

MARIO'S MAINTENANCE, INC.

FILED Apr 30 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						imiidde iif ifiitt fifti steil st	194 & M-147 AM(1) (MA	.10 81787 11818	ININI IBIL IBBI
2950 NE 10TH AVE POMPANO BEACH FL 33064 US		2950 NE 10TH AVE POMPANO BEACH FL US	POMPANO BEACH FL 33064			DO NOT WRITE IN THIS SPACE			
					3. Date In	corporated or Qualified	t		
		· • -				14/1994			
<u>├-</u> -		2a. Mailing Address	7			mber		Ar	pplied For
21		26	+			-0525491			ot Applicable
22 City & State		Suile, Apt. #, etc.	7			icate of Status Desired Sa.75 Additional Fee Required			
23		City & State	8			n Campaign Financing und Contribution	, Total		
Zip	Country	Zip	Zip Country			rporation owes or has p	paid the curre	ent year Int	angible
24	25	29	30	_		al Property Tax due Jur			√ No
	g. Name and Address of Curre	nt Registered Agent		54 S.	10. Name	and Address of New F	registered A	gent	
) Ģ	RTEGA, MARIO]'	B1 Name					ł
3848 NE HITH AVENUE POMPANO BEACH FL 33064				Street A	ddress (P.O. Box	Number is Not Accept	able)		7
					2950 N.1	E. 10th AV	ENUE		
			'	33					
			1	34 City	SAME		FL	85 Zip (Code
11. Pursuant t	to the provisions of Sections 607 050	02 and 607.1508, Florida Statu	tes, the ab	ove-named c	corporation submit	s this statement for the	nuronen et e	abaaaisa i	a sa sinta a sal
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.									
SIGNATURE									
12.	QELICERS AN	ND DIRECTORS	13.		ADDITIO	NS/CHANGES TO OFF	ICERS AND I	DIRECTOR	S IN 12
TITLE	Р	DELETE	1 1 TITLE				Ţ	X Change	☐ Addition
NAME	ORTEGA, MARIO		12 NAN	12 NAME					
STREET ADDRESS	3843-NE/17TH_AVE		1.3 STR	EET ADDRESS	2950 N.	E. 10th AV	ENUE		13
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STREET ADDRESS				ET ADDRESS					1
CITY-ST-ZIP	ertdy that the information surinlind w	with the films does not qualify t		-SI-ZIP	Lin Costine 110 0	((2)(i) Florido Ctot des	16		

ringeovy certify that ne information supplied with this hing closs not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the informatio indicated on this annual report is reported 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 aridress

SIGNATURE: