Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90116 027 ***150.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000077959

Corporation Nat							
QUANTUM LEAP CLEANING SERVICES, INC.							
Principal Place of E	Rusinace	Mailing Address					
P.O. BOX 273746 P.O. BOX 273746 TAMPA FL 33688 TAMPA FL 33688							
					DO NOT WRITE IN THIS SI	PACE	
					3. Date Incorporated or Qualifed 10/24/1994		
Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For	
21 26					<u>59-3278452</u>	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status Desired	\$8.75 Additional Fee Required	
22		27					
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Countr	·	This corporation owes the current year Intan-		
24	25	29 30	~~2	,		Yes □No	
	. Name and Address of Current F		,		10. Name and Address of New Registered Ag	ent	
			8	1 Name			
BALLAS, MARK E				82 Street Address (P.O. Box Number is Not Acceptable)			
13935 FLETCHERS MILL DRIVE				Succir			
TAMPA FL 33613			8:	3			
			8	4 City		85 Zip Code	
				1 '	FL		
11. Pursuant to the office or regist agent. I am far	te provisions of Sections 607.0502 attered agent, or both, in the State of miliar with, and accept the obligation	ind 607.1508, Florida Statutes, Florida. Such change was auth ns of, Section 607.0505, Florid	the abor norized b a Statute	ve-named or y the corpo s.	corporation submits this statement for the purpose of ch oration's board of directors. I hereby accept the appointr	anging its registered nent as registered	
SIGNATURE							
	ature, typed or printed name of registered agent an			ent signature re	equired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12	
12.	OFFICERS AND	DELETE	13.	. 1		Change Addition	
l f	ALLAS, MARK E	C. OCCC,C	1.2 NAME		•		
	1935 FLETCHERS MILL DRIVE		•	ET ADDRESS			
\ 	TAMPA FL 33613			ST-ZIP			
CITY-ST-ZIP IA	WIII X 1 E 30010	☐ DELETE	2.1 TITLE			☐ Change ☐ Additio	
1 -	ALLAS, MARK E	—	2.2 NAME	J			
	935 FLETCHERS MILL DRIVE		2.3 STRE	ET ADDRESS			
	MPA FL 33613		2. 4 CITY	İ			
TITLE		DELETE	3.1 TITLE			Change Addition	
	ے ہے۔ معاصمہ ممرع الکے۔	. 4	3.2 NAME	. ~	ه جا المستقل المستقل المستقلط		
STREET ADDRESS			3.3 STRE	ET ADDRESS			
CITY-ST-ZIP			3.4. CITY	-ST-ZIP			
TITLE		DELETE	4.1 TITLE			Change Addition	
NAME			4.2 NAM	E			
STREET ADDRESS			4.3 STRE	ET ADDRESS	·		
CITY-ST-ZIP			4.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE			Change Additio	
[5.2 NAME	: I		•	

6.4 CITY-ST-ZIP CITY-ST-ZIP 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 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 address with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

62 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ DELETE

Change

☐ Addition