SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P94000092499 (0)

BUILDING	MAINTENANCE	SERVICES.	INC.

Principal Place of Business Mailing Address 1261 WEST KING STREET 1261 WEST KING STREET **COCOA FL 32922 COCOA FL 32922** 3. Date Incorporated or Qualified 3a. Date of Last Report 01/01/1995 Applied For 2a. Mailing Address 2. Principal Place of Business Not Applicable 26 21 \$8.75 Additional Suite, Apt #, etc Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 \$5.00 May Be City & State City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees 28 23 Country 8. This corporation has liability for intangible tax under s. 199 032, Zip Country Zip Florida Statutes Yes No 25 29 30 24 Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name TODD, LORRAINE B Street Address (P.O. Box Number is Not Acceptable) 62 1261 WEST KING STREET COCOA FL 32922 83 Zip Code 84 85 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** (NOTE: Registered Agost signature required when resistating) Signature, typed or printed nanie of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96) (3/96) OFFICERS AND DIRECTORS 13. 12 DELETE Change Addition 1 1 TITLE TITLE 1.2 NAME CR2E034 BERNEY, VICKI D NAME 13 STREET ADDRESS **6386 BRACK STREET** STREET ADDRESS 1.4 CITY - ST - ZIP COCOA FL 32927 CITY - ST - ZIP Change Addition DELETE 21 TITLE TITLE 22 NAME NAME BERNEY, FRED R STREET ADDRESS **6366 BRACK STREET** 2 3 STREET ADDRESS CITY-ST-2IP COCOA FL 32927 2 4 CITY - ST-ZIP Change Addition DELETE 3 1 TITLE TITLE ST 3.2 NAME NAME TODD, LORRAINE B 3.3 STREET ADDRESS STREET ADDRESS 6366 BRACK STREET 34 CITY-ST-ZIP CITY-ST-ZIP COCOA FL 32927 Change Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - \$1 - ZIP CITY-ST-ZIP Change Addition DELETE 5 LTITLE TITLE 5.2 NAME NAME 5 3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-2IP Change Addition DELETE 61 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CHTY - ST - ZIP CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 617, Florida Statutes, and that my name appears in Block 19 or Block 13 if changed, or or an attachment with an address

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

LONDZINE B. TODD

06/10/96 407)632-3465