

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

PROFIT CORPORATION ANNUAL REPORT 1998	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---



DOCUMENT # **P95000019940 (2)**

1. Corporation Name

A BETTER CLEANING SERVICE, INC.

Principal Place of Business

**5876 JUDD FALLS RD. WEST
LAKE WORTH FL 33463**

Mailing Address

**5876 JUDD FALLS RD. WEST
LAKE WORTH FL 33463**

2. Principal Place of Business

2640 GATELY DR W.

2a. Mailing Address

2640 GATELY DR W

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 505

SUITE 505

City & State

City & State

WEST PALM BEACH

WEST PALM BEACH

Zip

Zip

33415

33415

Country

Country

P.B.

P.B.

9. Name and Address of Current Registered Agent

**ISCARO, VIRGINIA
5876 JUDD FALLS RD. WEST
LAKE WORTH FL 33463**

81. Name

H. VETRAGENIA A. TISOCARO INC.

82. Street Address (P.O. Box Number is Not Acceptable)

2640 GATELY DR. W.

83. City

SUITE 505

84. Zip Code

33415

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 *Virginia Soccar (PRES.)* VIRGINIA ISCARO PRES 2/16/98
(Signature, typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	NAME	1.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>	
NAME	STREET ADDRESS	1.2 NAME		
STREET ADDRESS	CITY-ST-ZIP	1.3 STREET ADDRESS		
CITY-ST-ZIP		1.4 CITY-ST-ZIP		
TITLE	NAME	2.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>	
NAME	STREET ADDRESS	2.2 NAME		
STREET ADDRESS	CITY-ST-ZIP	2.3 STREET ADDRESS		
CITY-ST-ZIP		2.4 CITY-ST-ZIP		
TITLE	NAME	3.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>	
NAME	STREET ADDRESS	3.2 NAME		
STREET ADDRESS	CITY-ST-ZIP	3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4 CITY-ST-ZIP		
TITLE	NAME	4.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>	
NAME	STREET ADDRESS	4.2 NAME		
STREET ADDRESS	CITY-ST-ZIP	4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE	NAME	5.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>	
NAME	STREET ADDRESS	5.2 NAME		
STREET ADDRESS	CITY-ST-ZIP	5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE	NAME	6.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>	
NAME	STREET ADDRESS	6.2 NAME		
STREET ADDRESS	CITY-ST-ZIP	6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 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.

SIGNATURE: *Virginia Soccar (Pres.)* 2/16/98 56 966 8036



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/10/1995

4. FEI Number

65-0568704

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75

Additional Fee Required

6. Election Campaign Financing

\$5.00

May Be Added to Fees

7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

10. Name and Address of New Registered Agent

H. VETRAGENIA A. TISOCARO INC.

Street Address (P.O. Box Number is Not Acceptable)

2640 GATELY DR. W.

SUITE 505

City

WEST PALM BEACH

Zip Code

33415

CR2E034 (10/97)

10/8/98

10/8/98

10/8/98

10/8/98

10/8/98

10/8/98