

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

FILED
Mar 27 1997 8:00am
Secretary of State

DOCUMENT # **P95000024726 (8)**

1. Corporation Name
K & A JANITORIAL SERVICES, INC.



Principal Place of Business

**1722 S.W. 84TH COURT
MIAMI FL 33155**

Mailing Address

**1722 S.W. 84TH COURT
MIAMI FL 33155-1040**

2. Principal Place of Business

21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

3. Date Incorporated or Qualified
03/28/1995

3a. Date of Last Report
03/21/1996

4. FEI Number
65-0610175

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**MORALES, ANICIA
1722 S.W. 84TH COURT
MIAMI FL 33155**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 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 designation of, Section 607.0505, Florida Statutes.

SIGNATURE

Anicia Morales

Anicia Morales

1-14-97

DATE

12. OFFICERS AND DIRECTORS

101 ☐ DELETE
NAME **D MORALES, ANICIA**
STREET ADDRESS **1722 S.W. 84TH COURT**
CITY-STATE-ZIP **MIAMI FL 33155**
102 ☐ DELETE
NAME **D MARRERO, KARLA**
STREET ADDRESS **14841 S.W. 155TH TERRACE**
CITY-STATE-ZIP **MIAMI FL 33187**
103 ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP
104 ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP
105 ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

111 ☐ Change ☐ Addition
112 NAME
113 STREET ADDRESS
114 CITY-STATE-ZIP
211 ☐ Change ☐ Addition
212 NAME
213 STREET ADDRESS
214 CITY-STATE-ZIP
311 ☐ Change ☐ Addition
312 NAME
313 STREET ADDRESS
314 CITY-STATE-ZIP
411 ☐ Change ☐ Addition
412 NAME
413 STREET ADDRESS
414 CITY-STATE-ZIP
511 ☐ Change ☐ Addition
512 NAME
513 STREET ADDRESS
514 CITY-STATE-ZIP
611 ☐ Change ☐ Addition
612 NAME
613 STREET ADDRESS
614 CITY-STATE-ZIP

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 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: *Anicia Morales* *Anicia Morales, President* **1-14-97** **(305) 669-9850**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)