## 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 # P95000024885 (2)

**GULF COAST PROFESSIONAL CLEANING, INC.** 

## FILED Apr 24 1998 8:00am Secretary of State

GULF COAST PHOFESSIONAL CLEANING, INC.					
Principal Place	of Business	Mailing Address		<u> </u>	
		•			
9812 OAK RUN DR BRADENTON FL 94202		9612 OAK RUN DR Bradenton Fl 34202		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				03/28/1995	Ì
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 3	RADENTON	26 4511· 56TI	HST.W.	65-0565991	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27	<u></u>		Fee Required
City & State	•	City & State	TAN EL	6. Election Campaign Financing  Trust Fund Contribution	\$5.00 May Be
Zip	Country	Zip Zip	Country	Trust Fund Contribution  B. This corporation owes or has paid the co	Added to Fees
24	25	~ A ~ . ~ -	MANATE	Personal Property Tax due June 30.	Ves No
	9. Name and Address of Current			10. Name and Address of New Registered	Agent
ROBERTS, BARBARA C				BADRARA C.	17077
9812 OAK RUN DR			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
BRADENTON FL 34202				4511-56	" ST. W.
			83]		J
			84 City		85 Zip Gode
44 6	A	1007 1500 51-11-0-11-	<u> </u>	radenton fi	
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, Saylon 697.0505, Florida Statutes.					
SIGNATURE TOP base C: 45th 4.20.98					
12,	Storature byedd or printed name of registered agen OFFICERS AND		Registered Agent signature requi	ADDITIONS/CHANGES TO OFFICERS AN	ID DIDECTORS IN 12
TITLE	D	DELETE	1.1 TITLE <b>D</b>	TO ACTO ACTOR ACTOR	Change Addition
NAME	ROBERTS, BARBARA C		1.2 NAME	BAKBAKAC 2001	
STREET ADDRESS	9612 OAK RUN DR		1.3 STREET ADDRESS	4511 - 5615 ST. W	٠ [8
CITY-ST-ZIP	BRADENTON FL 34202		1.4 CITY - ST - ZIP	BRADENTON, FL	34210
TITLE		DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		İ
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP		Change Addition
NAME		[] becert	4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		İ
CFTY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	61 TITLE		Change Addition
NAME			6.2 NAME		ļ
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP	0	
14. I hereby c	entity that the information supplied wit	n this tiling does not qualify for	the exemption stated in	Section 119.07(3)(i), Florida Statutes. I further (	certify that the information

In hereby certify that the information supplied with this filling 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:

Barbara CShitt

4-2098

QUI- 195-4NH