FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000039781 (6)**

1. Corporation Name

E T MAINTENANCE SERVICES, INC.

Principal Place of Business	Mailing Address
401 NE 167TH ST SUITE 1 NORTH MIAMI BEACH FL 33162	401 NE 167TH ST SUITE 1 NORTH MIAMI BEACH FL 33162

3. Date Incorporated or Qualified: 05/19/1995
3a. Date of Last Report:

2. Principal Place of Business
21: 1166 BELMORE TERRACE
22 Suite, Apt. #, etc: WELLINGTON FL.
23 City & State:
24 Zip: 33414
25 Country: WEST PALM BEACH

2a. Mailing Address
26: 1166 BELMORE TERRACE
27 Suite, Apt. #, etc: WELLINGTON FL.
28 City & State:
29 Country:
30: WEST PALM B.

4. FEI Number: 65-0595942 ☒ 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

TEJEDA, ARTEMIO E
401 NE 167TH ST
SUITE 1
NORTH MIAMI BEACH FL 33162

10. Name and Address of New Registered Agent

81 Name: TEJEDA, ARTEMIO E
82 Street Address (P.O. Box Number is Not Acceptable): 1166 BELMORE TERRACE
83
84 City: WELLINGTON FL 85 Zip Code: 33414-5531

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 _____ DATE
Signature, typed or printed name of registered agent and title of applicable officer (NOTE: Registered Agent signature required when name changed)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TEJEDA, ARTEMIO E 401 NE 167TH ST NORTH MIAMI BEACH FL 33162	☐ DELETE	1 TITLE / 1 2 NAME / 1 3 STREET ADDRESS / 1 4 CITY-ST-ZIP	TEJEDA, ARTEMIO E. 1166 BELMORE TERRACE WELLINGTON FL 33414-5531	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	2 1 TITLE / 2 2 NAME / 2 3 STREET ADDRESS / 2 4 CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6 1 TITLE / 6 2 NAME / 6 3 STREET ADDRESS / 6 4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (12/95)

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)(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: _____ 4-13-96 407-7903227
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #