FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT

STREET ADDRESS

CITY - ST - ZIP



FLORIDA DEPARTMENT OF STATE

ANNUAL REPORT	Secretal	3. Mortham ry of State CORPORATIONS		
1. Corporation Name	5000043080 (7))		
D & M CLEANING & MAIN	ITENANCE, INC.			
Principal Place of Business	Mailing Address		f sådiridåt ita i biar bitin aaret aderit	OBIII BAILE AIDEA MINI ADIAN JAME SAM 1884
3152 NOVUS ST SARASOTA FL 34237	3152 NOVUS ST SARASOTA FL 34237			
			3. Date incorporated or Qualified 05/26/1995	3a. Date of Last Report
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		65-0586524	Not Applicable
Suite, Apt. #, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	S8.75 Additional Fee Required
City & State	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Zip	Country	8. This corporation has liability for	
24 25	29	30		□No
g. Name and Address	of Current Registered Agent	81 Name	10. Name and Address of New F	registered Agent
BRANDENBERGER, MARVIN		82 Street Ad	idress (P.O. Box Number is Not Acceptab	pie)
3152 NOVUS ST SARASOTA FL 34237		83		
SMINOUTH FE 04207				85 Zip Code
		84 City		FL T
familiar with, and accept the obligation	rate of Florida. Such change was aumorry ins of, Section 607.0505, Florida Statutes	BUILDA THE COLDO BOOL & D	Oalt of directors. The coy doctor the app	pose of dranging to registered one pointment as registered agent. I am
Signature, typed or proteo natic of r	FIGERS AND DIRECTORS	13.		FICERS AND DIRECTORS IN 12
TITLE PRESIDENT.	DELETE	1 111111		Change Addition
NAME MARUN BRA	ANDENBEROER.	1.2 NAME		
STREET ADDRESS 3/52 NOVUS	ST.	1.3 STREET ADDRESS		
CITY-ST-ZIP SALASOTA, 76 TITLE VICE PRESIDE	. 34237	1.4 CITY - ST - ZIP		
TITLE VICE PRESIDE	WT. DELETE	2 1 1111.5		Change Addition
NAME OHUN WARR	EN	2.2 NAME	ų.	The grant grant of the
STREET ADDRESS 1674 UNIVER	SITY PKWY.	2.3 STREET ADDRESS		
CITY-ST-ZIP SARASOTA	×2.34245	24 01"Y ST-71" 3 1 TITLE		Change Addition
TITLE	☐ DELETE	3.2 NAME		<u>_</u>
NAME		3.3 STREET ADDRESS		
STREET ADDRESS		3.4 CiTY - ST - ZIP		
CITY-ST-ZIP TITLE	DELETE	4 1 TITLE		☐ Cnange ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY - ST - ZIP		4 4 CITY - S1 - 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	وسند کی رسی رسی رسی رسی	Palal □ Charge □ Addition
TITLE NAME	☐ DELETE	6 1 TIME 2 0 2 NAME	3000017 -04/09/9601	123021

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 suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that I am an officer or director of the corporation or the receiver or trusted 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 PED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR VIN ENGANDER WELF A 3 SIGNATURE;///

6 4 CITY - ST - 7IP

***200.00