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

Mailing Address

1861 SW 37 WAY

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

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FT LAUDERDALE FL 33312

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000051705

Country

25

Principal Place of Business

FT LAUDERDALE FL 33312

Suite, Apt. #, etc.

City & State

2. Principal Place of Business

1861 SW 37 WAY

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Zip

SOUTHERN DIXIE MAINTENANCE, INC.

9. Name and Address of Current Registered Agent					
HORA, PETER D 1861 SW 37 WAY FT LAUDERDALE FL 33312		81	Na	ame	
		82	Street Address (P.O. Box Number is Not Acceptable)		
		83			
		84	Cit	ty 85 Zip Code	
				FL	
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 of 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) (DATE					
	OFFICERS AND DIRECTORS	13,	i sigina	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.	Delete	1.1 TITLE		Change	
TITLE				Charge D Addition	
NAME	HORA, PETER D.	1.2 NAME			
STREET ADDRESS	1861 SW 37 WAY	1.3 STREET	ADDR	RESS	
CITY-ST-ZIP	FT LAUDERDALE FL	1.4 CITY-ST	T-ZIP		
TITLE	VS DELETE	2.1 TITLE		☐ Change ☐ Addition	
NAME	HORA, LINDA R	2.2 NAME			
STREET ADDRESS	1861 SW 37 WAY	2.3 STREET	ADDR	RESS	
CITY-ST-ZIP	FT LAUDERDALE FL	2. 4 CITY-S	T-ZIP		
TITLE	V DELETE	3.1 TITLE		☐ Change ☐ Addition	
NAME	HORA, BRIAN C.	3.2 NAME		· ·	
STREET ADDRESS	1861 SW 37 WAY	3.3 STREET	ADDR	RESS CONTROL OF THE PROPERTY O	
CITY-ST-ZIP	FT LAUDERDALE FL	3,4. CITY-S	T-ZIP		
TITLE	DELETE	4.1 TITLE		く、このではまってのを Change 法 L Addition	
NAME		4.2 NAME			
STREET ADDRESS	•	4.3 STREET	ADDR	RESS	
CITY-ST-ZIP	•	4.4 CITY-ST	T-ZIP		
TITLE	☐ DELETE	5.1 TITLE		Change Addition	
NAME		5.2 NAME		. 1 3 5	
STREET ADDRESS		5.3 STREET	r addr	1	
	;	5.4 CITY+S	T-ZIP	N. Artista	
CITY-ST-ZIP TITLE	☐ DELETE	6.1 TITLE		Change Addition	
		6.2 NAME			
NAME		6.3 STREET	r addr	RESS	
STREET ADDRESS	3	6.4 CITY-S		•	
CITY-ST-ZIP	sortify that the information supplied with this filing does not qualify for the	o ovemeti	ion et	etated in Section 119 07(3Vi). Florida Statutes, Lighther certify that the information	
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 supplied entail 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 or an attachment with an address, with all other like empowered.					

Country

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FILED Feb 18, 1999 8:00am **Secretary of State**

02-18-1999 90036 034 ***150.00



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 06/29/1995 4. FEI Number Applied For Not Applicable 65-0593704 \$8.75 Additional 5. Certifcate of Status Desired Fee Required \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 8. This corporation owes the current year Intangible □No Personal Property Tax. ☐ Yes 10. Name and Address of New Registered Agent

SIGNATURE: