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

CORPORATION ANNUAL REPORT

1996



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

DOCUMENT #

P95000063700 (5)

-AMERICAN CLEANING SYSTEMS, INC.

TELCON Proviotes, Inc.

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STREET ADDRESS CITY - SI - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS City-St-7iP TITLE

Principal	Place of Business		I JURATORI ING IDIAN DINAN DRINN DUNIN BANKI RETHU RUNIN ING HI ERHIN BUNI 1901						
Principal Place of Business Mailing Address 680 WEST FAIRBANKS AVE. 660 WEST FAIRBANKS A									
	ER PARK FL 32789	WINTER PARK F							
					3. Date Incorporated or Qualified 08/17/1995 3a. Date of Last Report				
2. Princip	pal Place of Business	2a. Mailing Address			4. FEI Number			Applied For	
1		26			59-333174	' 5	1-1	Not Applicable	
Suite,	Suite, Apt. #, etc. Suite, Apt. #, etc 27				5. Certificate of Status Desired	Status Desired Status Desired Fee Required			
Orty &	City & State C		City & State		6. Election Campaign Financing Trust Fund Contribution	9 🗆	\$5.00 May Be Added to Fees		
Ζιρ 4	Country 25	Z:p 29	Zip Country 30		8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes ☐ No				
	9. Name and Address of C	Current Registered Agent			10. Name and Address of Ne	w Registere	d Agent		
_				81 Name	•				
	MIGLIACCIO, RICHARD C				t Address (P.O. Box Number is Not Accep	table)			
660 WEST FAIRBANKS AVE.									
W	INTER PARK FL 32789			83					
						F	85 Zi	p Code	
11. Pursu	uant to the provisions of Sections 607	7.0502 and 607.1508. Florida St.	atutes, the abo	ve-named r	corporation submits this statement for the			registered office	
SIGNATU	Signature, typed or printed name of register			Agent signature	required when reinstahing)	DATE			
IZ.	OFFICER	RS AND DIRECTORS	13.	T. F.	ADDITIONS/CHANGES TO C	OFFICERS A	ND DIRECTO	DRS IN 12 Addition	
IAME			1. 1 11 1.2 NA		PJ 0			Addition	
TREET ADDE	DEGG			ime Reet address	PSD MISCIACCIO RIC 1507 GOLFSION WINTER PARK	MARD	· C.		
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CITY - ST - ZIP)		4.4 Ci	Y - ST - ZIP	***200.00				
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IAME			5.2 NA	ME					
TREET ADDA	RESS		5.3 ST	reet address					
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14. Ido hereby certify that the information supplied with this filling 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 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.

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6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST- ZIP

NAME

STREET ADDRESS

CITY-ST-ZIP

DELETE

ecrofresident 4-23-76
Date

☐ Change

Addition