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 PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # P95000065732 (6)

G. & C. EXPRESS CLEANING SERVICES, INC.

Principal Place of Business Mailing Address 1820 WEST 58TH STREET STE 19 1820 WEST 58TH STREET STE 19 HIALEAH FL 33012 HIALEAH FL 33012 3. Date Incorporated or Qualified 3a. Date of Last Report 08/24/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65.06440 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Ζıρ Country $Z_{\mathbb{P}}$ Country 8. This corporation has liability for intangible tax under s 199,032, 24 25 30 ✓ Yes □ No 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name **GUILLERMO RODRIGUEZ & ASSOC.** 82 Street Address (P.O. Box Number is Not Acceptable) 4011 W. FLAGLER STREET STE 403 **MIAMI FL 33134** 83 84 City 85 Zıp Code 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 Signature, typed or printer) name of registered agent and the if approace (NoTE: Registered Agent signature required when renstating) DA'L (12/95)OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TIFLE PD DELETE 1.11016 Change Addition NAME BERON, GILMA L 1.2 NAME CR2E034 1820 WEST 58TH STREET STE 19 STREET ADDRESS 1.3 STREET ADDRESS HIALEAH FL 33012 CITY - ST - ZIP 1.4 CITY - ST - ZIP TITLE STD C DELETE Addition 2 1 TITLE Change NAME LOPEZ, CLAUDIA P 2.2 NAME STREET ADDRESS 1820 WEST 58TH STREET STE 19 2.3 STREET ADDRESS CITY - ST - ZIP HIALEAH FL 33012 2.4 CHY+ST-ZIP DELETE TITLE 3 1 THUE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY - ST - 7IP THILE □ DELETE Change 4. 1 T-TLE Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP TITLE DELETE 5 1 TITLE Change Addition 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CHTY - ST-7IP TITLE DELETE 6.1 TITLE Change ☐ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

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 supplemental agoual 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 trastee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 inchanged, or only in attachments that an address.

OFFICER OR DIRECTOR

64 CITY - ST - ZIP

SIGNATURE:

City-St-7iP

04/08/9 6 305-8W-3849