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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT #** P95000081619

THREE LITTLE PIGS CLEANING, INC.

Principal Place of Business	Mailing Address
11238 WOLF COURT	11238 WOLF CO
SOUT DICHEY EL 22469	PORT RICHEY F

FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90074 026 \*\*\*150.00



11238 WOLF CO PORT RICHEY F US'	=	11238 WOLF COURT PORT RICHEY FL 33468 US			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed  10/24/1995				
2 Principal PI	ace of Business	2a. Mailing Address			4. FEI Number		A	pplied For	
—		26 6526 Boats	man	of and	<b>59-3341814</b>		N	ot Applicable	
Suite, Apt. #, etc.  Suite, Apt. #, etc.  27  City & State  City & State		75000 01142		5 Cortificate of Status Decired   \$8.7			5 Additional Required		
			FL		6. Election Campaign	- 1	- 1		
Zip Country 24 34667 25 Country		Zip Country 29 34667 30 US		8. This corporation of Personal Property	•	Intangible	<b>™</b> No		
24 2 .00	9. Name and Address of Current		·		10. Name and Addre	ss of New Register	ed Agent		
	o. Hame and Addition of Carrotte		81	Name	<u> </u>				
THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD 343 ALMERIA AVENUE CORAL GABLES FL 33134			82 Street Address (P.O. Box Number is Not Acceptable)						
			83						
			84	City		F	85 Zip	Code	
	to the provisions of Sections 607.0502	COZ 4500 Florida Chatulan	ha abau	o named o	ornaration submits this state		<b>-</b>	s registered	
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	i Florida. Such change was autho	onzed by	the corpor	ration's board of directors. I	nereby accept the ap	pointment as re	egistered	
SIGNATURE	Signature, typed or printed name of registered agent a	and title if ennicable (NOTE: Reg	istered Ape	nt signature rec	guired when reinstating)	DATE			
12.	OFFICERS AND		13.			GES TO OFFICERS	AND DIRECTO	ORS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE				Change	☐ Addition	
NAME	TELLIER, JOANNE D		12 NAME		• (				
STREET ADDRESS	11238 WOLF COURT		1.3 STREE	TADDRESS	6526 Bootyn	nd Unive			
CITY-ST-ZIP	PORT RICHEY FL 33468		1.4 CITY-S	ST-ZIP	Hudson, FL	34667			
TITLE	STD	☐ OELETE	2.1 TITLE				Change	☐ Addition	
NAME	TELLIER, ROGER P		2.2 NAME	}					
STREET ADDRESS	11238 WOLF COURT		2.3 STREET		6526 Bonty	ad Drive		}	
CITY-ST-ZIP	PORT RICHEY FL 33468		2. 4 CITY-	ST-ZIP	Hudson FC	34667			
TITLE	TOTAL MODILES TE OFFICE	☐ DELETE	3.1 TITLE				☐ Change	☐ Addition	
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREE	T ADDRESS					
CITY-ST-ZIP			3 4. CITY-	ST-ZIP					
TITLE		☐ DELETE	4.1 TITLE				☐ Change	Addition	
NAME			4. 2 NAME						
STREET ADDRESS			4.3 STREE	TADDRESS					
CITY-ST-Z)P			4.4 CITY-5	T-ZIP					
TITLE		☐ DELETE	5.1 TITLE				☐ Change	☐ Addition	
NAME			5.2 NAME						
STREET ADDRESS				T ADDRESS					
CITY-ST-ZIP			5.4 CITY-5	ST-ZIP					
TITLE		☐ DELETE	6.1 TITLE				☐ Change	☐ Addition	
NAME			62 NAME						

6.4 CITY-ST-ZIP 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 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, with all other like empowered.

6.3 STREET ADDRESS

**SIGNATURE:** 

STREET ADDRESS