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

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000085277 (8)

SUITE CLEAN OF AMELIA, INC.

Principal Place of Business Mailing Address						I FOOTION III IDIOL NIEL OOLII OOLII OO		UIIIU UII IUUII	101 1 1011
1012 ATLANTIC AVENUE FERNANDINA BEACH FL 32034 US		1012 ATLANTIC AVENUE FERNANDINA BEACH FL 32034-3633 US							
					3. Date Incorporated or Qualified 10/17/1995 3a. Date of Last Report 04/30/1996				
2. Principal Pi	ace of Business	2a. Mailing Address			4. FEI Number			plied For	
21		26			59-3357695 Not Applicable				
Suite, Apt.	#, etc.	Suite, Apt #, etc.			5. Certificate of Status Desired \$8.75 Additional Fee Required				
City & State		City & State			6. Election Campaign Financing			····	
23		28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip	Country	Zip	Country			8. This corporation has liability for intangible tax under s. 199.032,			
24	25 29 30		30	Florida Statutes			Yes No		
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Re	gistered	Agent	
MICHAEL, LAURENCE D				81	Name				
	PARK SQUARE PLACE			82	Street Addr	ess (P.O. Box Number is Not Acceptal	ole)		
FERT	NANDINA BEACH FL 32034			83		A MILA SERVICE NO.			
				84	City			85 Zip (Code
							FL	<u> </u>	
11. Pursuant t	to the provisions of Sections 607.0502	2 and 607.1508, Florida Stat of Elorida, Such change wa	tutes, the at	ove-	named corp	poration submits this statement for the pition's board of directors. I hereby acce	ourpose o	f changing it: pointment as	s registered registered
agent. I a	m familiar with, and accept the obliga	itions of, Section 607.0505,	Florida Stat	utos.	inc oc.pora	none board of all colors. The copy acco	,, ,,,,, e,p	, , , , , , , , , , , , , , , , , , , ,	
SIGNATURE						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Signature, typed or printed name of registered agent and title if applicable 12. OFFICERS AND DIRECTORS				i Agent	t signature requi	red when re-estating) ADDITIONS/CHANGES TO OFFI	DATE DEDO ANI	DIDECTOR	9C INI 12
12.		DELETE				ADDITIONS/CHANGES TO OFFI	JENS AIN	Change	Addition
TITLE	D AND HALL LANDENGE D	-		I.1 TOLE I.2 NAME				Onlinge	
NAME	MICHAEL, LAURENCE D								
STREET ADDRESS 2907 PARK SQUARE PLACE		i	1.3 STREET ADDRE		1				
CITY-ST-ZIP	FERNANDINA BEACH FL 32034	DELETE	1.4 CII		- ZIP			Change	Addition
TATLE	D	Dittie	2.1 Ti					Gliange	Addition
NAME	MICHAEL, EDITH		2.2 N/						
STREET ADDRESS	2907 PARK SQUARE PLACE			2.3 STREET ADDRESS					
CITY-ST-ZIP	FERNANDINA BEACH FL 32034			IIY-SI	- ZIF			Change	Addition
TITLE		☐ DELETE	311111.					L Guange	☐ Within [
NAME			3.2 N/						
STREET ADDRESS					NDDRESS				
CITY-ST-ZIP		The state of the s		ITY-ST	- 7IF'			Поь	
TITLE	[_] DELETE			4.1 TITLE				Change	Addition
NAME			4.2 N						
STREET ADDRESS			4.3 S	REET A	ADDRESS				
CITY-ST-ZIP				4.4 CITY-ST-7IP					
TITLE		☐ DELETE	5.1 1	5.1 YITLE				☐ Change	Addition
NAME			5.2 N	AME					
STREET ADDRESS			5.3 \$	IRECT A	ADDRESS				
CITY-ST-ZIP			54C	1Y - S1	- 20"				
TITLE		☐ DELETE	☐ DELETE 61					Change Change	Addition
MARAC			62 N	ANAC					

63 STREET ADDRESS

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statules. 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 oath; 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.

これの教養をおるためのと、

STREET ADDRESS

4-18-67

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FILED

Apr 24 1997 8:00am

Secretary of State

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