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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000091076 (6) CAN DO PRESSURE WASHING, INC.

FILED Apr 24 1998 8:00am Secretary of State

Principal Place of Business		Mailing Address	Mailing Address		T EGGINGOF NIN SAIDT MHAN ADINI ADDIN ADDIN EBNE IN	TOT DIENT DENIS TORKE BIST LEDE
723 E COLONIAL DR ORLANDO FL 32803		5977/103 BRAEMER PLACE ORLANDO FL 32822		•	OO NOT WOLF ALT THE	00405
					DO NOT WRITE IN THIS 3. Date Incorporated or Qualified	SPACE
					11/28/1995	
2. Principal Place of Business 2a. Mailing Ac		2a. Mailing Address			4. FEI Number	Applied For
21		26		59-3355039	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		[27]			Fee Required	
City & State		City & State .		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip Country		Zip Country		8. This corporation owes or has paid the current year Intangible		
24	25			•	Personal Property Tax due June 30. Yes No	
	9. Name and Address of Cur				10. Name and Address of New Registered	Agent
GOFF, BARRY L			81	Name		
215 N EOLA DR			82	Street Add	ress (P.O. Box Number is Not Acceptable)	
OR	LANDO FL 32801		ļ <u></u> .	<u> </u>		
			83			
			84	City		85 Zip Code
44 10	10 the annual Contract Contrac	V 02 C07 4500 Florida Chat.			poration submits this statement for the purpose of	- Laboration its assistance
 office or r 	egistered agent, or both, in the St	ate of Florida. Such change was	authorized b	v the corpora	tion's board of directors. I hereby accept the ap	pointment as registered
l	m familiar with, and accept the ob	digations of, Section 607.0505, Fi	lorida Statute	IS.	- 2110	11.27
SIGNATURE Signature, specific penils of name of registered agent and letter it applicable (NOTE			TÉ Registered Ac	ent signature requ	ired when reinstaling) DR12	/ 77
12.	OFFICERS A	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE			Change Addition
NAME ELLIS, T J			1.2 NAME			
STREET ADDRESS 5977/103 BRAEMER PLACE ORLANDO FL 32822		1.3 STREET ADDI		ì		
CITY-ST-ZIP	ORLANDO PL 32822		1.4 CITY - ST - ZIP 2.1 TITLE			Change Addition
NAME	ב סננות		2 1 111LE 2 2 NAME			
STREET ADDRESS				T ADDRESS		
CHTY-ST-ZIP			2 4 CITY			
TIFLE	DELETE		3.1 TITLE	01 12		Change Addition
NAME			3.2 NAME	Ì		Ì
STREET ADDRESS			3.3 S REE	1 ADDRESS		
CITY-ST-ZIP			3.4. ITY	ST-ZIP		
TITLE	DELETE		4.1 TLE	ĺ		Change Addition
NAME			4 2 AME			
STREET ADDRESS			1 6	T ADDRESS		
CITY-ST-ZIP TITLE		☐ DELETE	4.4 IV- 5.1 ILE	ST-ZIP		☐ Change ☐ Addition
NAME			5.2 ME	İ		
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP				ST-ZIP		
TITLE		DELETE	6.1 LE			Change Addition
NAME			6.2 LME	Ì		
STREET ADDRESS			6.3 REE	T ADDRESS		
CITY-ST-ZIP				ST-ZIP		
14 I hereby (certify that the information supplied	t with this filipe does not qualify f	or the emm	ntion stated in	Section 119.07(3)(i). Florida Statutes, I further of	ertity that the information.

or this true and accurate and that my signature shall have the same legal effect as it made under oath; that I am also empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in an address.