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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P96000002455** (9)

GERARD P. MAURY DRAIN CLEANING SERVICE, INC.

May 12 1997 8:00am
Secretary of State

FILED

- Principal Place					<u> </u>	1311) en 110 11011 biodi di	161 CH (188)
		Mailing Address			A Annual of the state and the	·*··· **!!* ··*!! #165! #1	*** # ** * * # #
5350 21ST AVENUE SW NAPLES FL 33999		5350 21ST AVENUE SW Naples Fl 34118-6812					
					3. Date incorporated or Qualified 01/04/1996	3a. Date of Last	Report
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			6506 33091		Not Applicable
Suite, Apl		Suite, Apt. #, etc.			5. Certificate of Status Desired	Fee Fee	5 Additional Required
City & State		City & State			Election Campaign Financing Trust Fund Contribution	☐ Adde	May Be d to Fees
Zip ==1	Country	Zip	Cour	ntry	8. This corporation has liability for in	angible tax under	rs. 199.032,
24	25 9, Name and Address of Curr	29	[30]		Florida Statutes 10. Name and Address of New Reg	Yes No	
	JRY, GERALD P	eur vedistelen Afterir		81 Name	10. Name and Adoress of New Net	Installed wholer	
	21ST AVENUE SW		L				
	LES FL 33999			B2 Street Add	iress (P.O. Box Number is Not Acceptabl	e)	
TWW V	CTO 1 F 00999		h.	83			
	•			84 City		85 Zi	ip Code
***************************************		V. CO. 1 CO. C. 11 O			poration submits this statement for the patients board of directors. I hereby accept	FL " "	- The second second
SIGNATURE	Signature: typed or printed name of registered OFFICERS.	AND DIRECTORS	OTE: Registered	Agent signature requ	ilred when reinstating) ADDITIONS/CHANGES TO OFFIC		
TITLE	D	DELETE	1.1 1(1)	LE		Chang	e Addition
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Ido 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 if 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 Wack 13 if changed, or on an attachment with an address.

SIGNATURE:

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

4/30/97

(941) 455-5718

Daytime Prione #