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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B, Mortham

Secretary of State **DIVISION OF CORPORATIONS**

FILED Mar 27 1998 8:00am Secretary of State

DOCUMENT # P9600008616 (I L&S DOCK CLEANING & SEALING INC. Principal Place of Business Mailing Address 3211 PRICE AVENUE P 0 BOX 560914 ORLANDO FL 32806 ORLANDO FL 32856						
		US			DO NOT WRITE IN TH 3. Date Incorporated or Qualified	IS SPACE
					01/24/1996	
2. Principal Place of Business 2a. Mailing Add			ess		4. FEI Number	Applied For
21		26	· · · · · · · · · · · · · · · · · · ·		59-3357416	Not Applicable
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23	•	28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Count	try	8. This corporation owes or has paid the	
24	25 9. Name and Address of Curr	29 ant Registered Agent	[30]		Personal Property Tax due June 30. 10. Name and Address of New Registers	Yes , No
20		aur Hadistelan Wasiit		Name	10. Name and Address of New Negisters	o Agent
	OTY, LOURDES S 211 PRICE AVENUE				46.20	
	RLANDO FL 32806		8	Street Ac	eet Address (P.O. Box Number is Not Acceptable)	
-			8	3		
			8	4 City		85 Zip Code
\$4 Qurouant	to the provisions of Continue 607.0	EOO and COZ 1EOO Flacida State	too the one	ua samad ar	orporation submits this statement for the purpose	L 65 zip code
SIGNATURE	Signature, typed or printed name of registered (agent and little if applicable. (NC	TE: Registered A		ration's board of directors. I hereby accept the a quired when reinstating) DATE	<u> </u>
12.	,	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	
TITLE NAME	DOTY, LOURDES S		1.1 TITLE 1.2 NAM	i		Change Addition
STREET ADDRESS	3211 PRICE AVENUE	<u> </u>		ET ADDRESS		1
CITY-ST-ZIP	ORLANDO FL 32806		1.4 CITY			
TITLE		DELETE 2.1				Change Addition
NAME	2		2.2 NAM	E }		
STREET ADDRESS			2.3 STRE	ET ADDRESS		
CITY-ST-ZIP		T December		-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE	ì		Change Addition
NAME STREET ADDRESS			3.2 NAM	ET ADDRESS		
CITY-ST-ZIP			3.4. CITY			
TITLE		☐ DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAM			
STREET ADDRESS			4.3 STRE	ET ADDRESS		
CITY-ST-ZIP			4.4 CITY	-ST-ZIP		
TITLE	DELETE 5.1 TI		5.1 TiTLE			☐ Change ☐ Addition
NAME			5.2 NAMI			
STREET ADDRESS				ET ADDRESS]
CITY - ST - ZIP	·		5.4 CITY-			Change Addition
TITLE	15	☐ DELETE	6.1 TITLE	[☐ Change ☐ Addition
NAME Street address :			6.2 NAMI	ET ADDRESS		
CITY-ST-ZIP			6.4 CITY			
	portify that the information cumplied	with this filing does not qualify			in Caption 110 07/9VI). Florida Statutos I further	

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 fire 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 from an attachment with an address.

120198