## \*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 # P96000015127 (9)

SPOTLESS OFFICE INC.

Principal Place of Business 11340 SW 49 ST. MIAMI FL 33165

2. Principal Place of Business

Suite, Apt. #, etc.

SIGNATURE:

Mailing Address

11340 SW 49 ST. MIAMI FL 33165-8037

2a. Mailing Address

Suite, Apt. #, etc

## FILED May 16 1997 8:00am Secretary of State



3a. Date of Last Report

Applied For Not Applicable

\$8.75 Additional

Fee Required

0222228

3. Date Incorporated or Qualified

5. Certificate of Status Desired

02/14/1996

23		28	·		6. Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees	
Zip	Country	Zιρ	Cou	intry	8. This corporation has liability for it	ntangible tax under s	. 199.032,
24	25 29 30				Florida Statutes Services No		
	9. Name and Address of Cu	rrent Registered Agent	·		10. Name and Address of New Reg	platered Agent	
DIAZ, ANDRES 11340 SW 49 ST. MIAMI FL 33165				81 Name	:	•	]
				82 Street Addr	ess (P.O. Box Number is Not Acceptab	le)	
				83	· · · · · · · · · · · · · · · · · · ·	· <del>····································</del>	
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				84 City		FL 85 Zip (	Code
office or ri	to the provisions of Sections 607. agistered agelt, or both, in the S rii biriijia: with, and accept the <u>o</u>	tate of Florida. Such char	nge was authorize	d by the corporat	oration submits this statement for the prion's board of directors. I hereby acception	urpose of changing it it the appointment as	s registered registered
SIGNATURE /		udos Ras			09-	18-97 DATE	ķ
	The state of the s	d agent and title if applicable	(NOTE Registere	d Agent signature requir	ed when reinstating)	DATE	
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	· · · · · · · · · · · · · · · · · · ·	
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0/17 - \$1 - 7/2	or earth, that the information our	ahad with this filing does		TY-ST-ZIP	in Section 119.07(3)(i), Florida Statutes	I further earlie that	tho
information I am an of appears in	og cerning mai me mormation sup in indicated on this annual report ficer or director of the comporation in Block 12 or Block 12 in Viange	or supplemental annual r or supplemental annual r or the receiver or truste d, or on an attachment wi	eport is true and a e empowered to e th an address.	accurate and that execute this report	my section 119.07(3)(i), Florida statutes my signature shall have the same legal t as required by Chapter 607, Florida St	effect as if made und latutes; and that my n	der oath; that name