Letter # 697 A 60031751

FILE NUMBER FILING FEE AFTER [illegible]

REPORT

1997

DOCUMENT # P 96000018117

Sandra B. Mortham

FILED

97 AUG -6 PM 1:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[redacted]

Best Maid Service Group.

Principal Place of Business
BEST MAID Service Group INC
531 SW 167 Ave
Ft. Lauderdale, Fl 33326

Mailing Address
9100 S. DADELAND BLVD.
SUITE 704
MIAMI FK 33156-7815

3. Date Incorporated or Qualified: 2-27-96

3a. Date of Last Report:

21. Principal Place of Business: 531 SW 167 Ave

26. Mailing Address:

4. Federal Tax: 65-0646997

Not Applicable

22. Suite, Apt. #, etc.:

27. Suite, Apt. #, etc.: Sand.

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

23. City & State: Ft. Lauderdale, Fl 33326

28. City & State:

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

24. Zip:

25. Country:

29. Zip:

30. Country:

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

Raymond E. Trufant.
531 S.W. 167 ave.
Ft. Lauderdale, FL 33326

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City: FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE × Raymond E. Trufant President Raymond E. Trufant 8-16-97

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	President ☐ DELETE
NAME	Raymond E. Trufant
STREET ADDRESS	531 SW 167 Ave
CITY-ST-ZIP	Ft. Lauderdale, Fl 33326
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	300002263093--0
4.3 STREET ADDRESS	-08/11/97--01069--012
4.4 CITY-ST-ZIP	****165.00 ****165.00
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 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 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 Block 13 if changed, or on an attachment with an address.

SIGNATURE(S) Raymond E. Trufant

CR2E031 (9/96)