

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 06, 2004 8:00 am
Secretary of State

05-06-2004 90186 043 ***150.00

DOCUMENT # P96000018334

1. Entity Name
PRO CLEAN & MAINTENANCE, INC.



Principal Place of Business Mailing Address
16598 NW 5TH STREET 16598 NW 5TH STREET
PEMBROKE PINES HOLLYWOOD, FL 33023 US PEMBROKE PINES HOLLYWOOD, FL 33023 US

24072408



2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

05032004 Chg-P CR2E034 (10/03)

City & State

City & State

4. FEI Number

65-0644124

Applied For

Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TODD SERVICE INC
16598 NW 5TH STREET
PEMBROKE PINES, FL 33023

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PTD ☐ Delete
NAME GAZITUA, JOHN L JR.
STREET ADDRESS 16598 NORTHWEST 5TH STREET
CITY-ST-ZIP PEMBROKE PINES, FL 33023

TITLE PTD ☒ Change ☐ Addition
NAME John Gazitua
STREET ADDRESS 19922 SW 3rd place
CITY-ST-ZIP Pembroke Pines FL 33029

TITLE VSD ☐ Delete
NAME GAZITUA, DANIEL W
STREET ADDRESS 16598 NORTHWEST 5TH STREET
CITY-ST-ZIP PEMBROKE PINES, FL 33023

TITLE VSD ☒ Change ☐ Addition
NAME Gazitua, Daniel
STREET ADDRESS 19922 SW 3rd place
CITY-ST-ZIP Pembroke Pines Flc 33029

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

John Gazitua
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 3, 2004
Date

954307169
Daytime Phone #