

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

FILED
Apr 22 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000025984 (1)

1. Corporation Name

FLORIDA CORPORATE HOUSEKEEPER, INC.



Principal Place of Business

1590SW23 CT

1
FT LAUDERDALE FL 33315
US

Mailing Address

1590 SW 23 CT

1
FT LAUDERDAL FL 33315
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/18/1996

4. FEI Number

65-0672186

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☒ No

2. Principal Place of Business

21 314 NW 69TH AVE

Suite, Apt. #, etc.

22 #186

City & State

23 PLANTATION FL.

24 33317

25 USA

2a. Mailing Address

26 314 NW 69TH AVE

Suite, Apt. #, etc.

27 #186

City & State

28 PLANTATION FL.

29 33317

30 USA

9. Name and Address of Current Registered Agent

DANIELSON, LEE

1590 SW 23 CT

1
FT LAUDERDALE FL 33315

10. Name and Address of New Registered Agent

81 Name

LEE DANIELSON

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

314 NW 69TH AVE #186

83

84

City PLANTATION

FL

85 Zip Code 33317

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

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

NAME DANIELSON, LEE

STREET ADDRESS 1590 SW 23 CT, 1

CITY-ST-ZIP FT LAUDERDALE FL

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

DIRECTOR
LEE DANIELSON

314 NW 69TH AVE #186

PLANTATION FL 33317

VICE PRESIDENT

NATHALIE LYNCH

314 NW 69TH AVE #186

PLANTATION FL 33317

14. 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 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

LEE DANIELSON

4/16/98

901-372-7770

CR2E034 (10/97)