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

PROFIT CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000026136 (7)

ADVANCED AIR DUCT CLEANING, INC.

Principal Place of Business

Mailing Address

FILED Feb 06 1998 8:00am Secretary of State



2848 ST. JOHNS BLUFF ROAD SOUTH 2848 ST. JOHNS BLUFF JACKSONVILLE FL 32246 JACKSONVILLE FL 32246				ROAD SOUTH		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
Principal Place of Business 2a. Mailing Address						03/25/1996			
<u> </u>	Place of Business	2a. Mailing Address				4. FEI Number		Applied For	
21	#	26				59-3372466		Not Applicable	
Suite, Apt.		Suite, Apt. #, etc.	27			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip	Country	Zip	ip Country			8. This corporation owes or has paid the cur.			
24	25	29	30			Personal Property Tax due June 30. Yes No			
Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent			
DASHER, SHIRLEY					Name				
2848 ST. JOHNS BLUFF ROAD SOUTH				32	Street Ad	dress (P.O. Box Number is Not Acceptable)			
JACKSONVILLE FL 32246				_	Outou na	dress (F.O. Dox Number is Not Acceptable)			
			[8	33					
			[8	34	City	FL	85 Z	ip 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 Signature, typed or printed name of registered agent and title # applicable. (NOTE, Registered					signature requ	uired when reinstaling) DATE			
12.	OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND	DIRECT	ORS IN 12	
TITLE	D	☐ DELETE	1.1 TITL	E			Chang	e 🗌 Addition	
NAME	KITLER, CRAIG R		1.2 NAM	1E		,		İ	
STREET ADDFESS	1320 AVANT ROAD		1.3 STR	EET AD	DRESS				
CITY-ST-ZIP	YULEE FL 32097 1.4 C		1.4 CITY	/-ST-2	ZIP	•			
TITLE	D DELETE 2.1 To		2.1 TITL	E			Chang	e 🔲 Addition	
NAME	DASHER, SHIRLEY 22h		2.2 NAM	1E	1				
STREET ADDRESS	1951 LEON ROAD 235		2.3 STR	EET AD	DRESS			ĺ	
CITY-ST-ZIP	JACKSONVILLE FL 32246 2.4		2. 4 GIT	Y-\$T-	ZIP			-	
TITLE	DELETE 3.1 T			E			Chang	e Addition	
NAME	3.2 M		3.2 NAM	ΙE					
STREET ADDRESS			3.3 STR	EET AD	DRESS				
CITY-ST-ZIP	3.4.1			Y-ST-	ZIP				
TITLE	DELETE 4.1 TI			E			☐ Chang	e Addition	
NAME			4. 2 NAN	λE					
STREET ADDRESS			4.3 STR	EET AD	DRESS				
CITY-ST-ZIP			4.4 CITY	'-ST-2	ZIP				
TITLE		☐ DELETE	5.1 TITU	E			☐ Chang	e 🔲 Addition	
NAME			5.2 NAM	E				1	
STREET ADDRESS			. 5.3 STRE	ET AD	DRESS			ł	
CITY-ST-ZIP			5.4 CITY					ļ	
TITLE		☐ DELETE	6.1 TITL				Chang	e Addition	
NAME			6.2 NAM	E	l				
STREET ADDRESS			6.3 STR		DRESS			-	
CITY-ST-ZIP			6.4 CITY		210				

14. I hereby certify that the information supplied with this filling 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: SHIRLEY DASNEE TREASU