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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P96000030753**

1. Corporation Name

FLOOR CLEAN SERVICES, INC.

FILED Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90030 013 ***150.00



Principal Place	e of Business	Mailing Address			_				
2799 EAST 4 A	VENUE				·				
APT 2						DO NOT MID	TE IN THIS	CDACE	
HIALEAH FL 33013 HIALEAH FL 33013						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed			
NEW ADDRESS:						04/09/1996			
2. Principal P	lace of Business	2a. Mailing Address			_	4. FEI Number		`	lied For
7190	W. 3rd. AVE.	26 7190 W. 3rd	. AVE			65-0659005			Applicable
Suite, Apt.	#, etc. NONE	Suite, Apt. #, etc.				5. Certifcate of Status Desired		\$8.75 A	_
City & State	e	City & State			_	6. Election Campaign Financing		\$5.00 h	vlav Be
23 HIAL	EAH, FLORIDA	28 HIALEAH, FLO	RIDA	1		Trust Fund Contribution		Added to	Fees
Zip	Country	Zip	Coun		_	8. This corporation owes the curr	rent year Inta		
24 330	014 25 USA	29 33014 3	0 1	ISA	1	Personal Property Tax.	_	☐ Yes	□No
	9. Name and Address of Curren					10. Name and Address of New	Registered /	Agent	_
					Name	NONE		•	
BOLANOS, ANTONIO					Street Addre	ss (P.O. Box Number is Not Accept	able)		
	EAST 4 AVENUE			82	ou cot / todic.				
APT	=		ſ	83					
HIAL	EAH FL 33013		-	-				85 Zip C	ode
]				84	City	•	FL	85 Zip C	ode
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									
11. Pursuant to the provisions of Sections 607,0502 and 507,1508, Florida Statutes, the above-named 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.									
1	in igning wat, and accept the being								
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable (NOTE: F	legistered A	Agent	signature required	when reinstating)	DATE		
12.		D DIRECTORS	13.			ADDITIONS/CHANGES TO OF	FICERS AN		
TITLE	PD	☐ DELETE	1.1 TIT	LE				Change	Addition
NAME	BOLANOS, ANTONIO		1.2 NA	ME		,			
STREET ADDRESS	2799 EAST 4 AVENUE		1.3 STF	REET.	ADORESS				
CITY-ST-ZIP	HIALEAH FL 33013		1.4 CIT	Y-ST	- ZIP				
TITLE		☐ DELETE	2.1 TITI	LE		/	•	Change	Addition
NAME			2.2 NA	ME		/			
STREET ADDRESS			2.3 STF	REET	ADORESS				l l
CITY-ST-ZIP			2.4 CII	TY-ST	r-ziP				· ,
TITLE		☐ DELETE	3.1 TIT	UE		/		☐ Change	☐ Addition
NAME	\ \		3.2 NA	ME		/			
STREET ADDRESS			3.3 STF	REET	ADDRESS	/			
CITY-ST-ZIP			3.4. ÇIT	TY- ST	r- ziP				
TITLE		☐ DELETE	4.1 T∤TI	LE				☐ Change	☐ Addition
NAME	\		4. 2 NA	ME				•	
STREET ADDRESS	\		4.3 STF	REET	ADORESS	/			
CITY-ST-ZIP			4.4 CIT	Y-ST	• ZIP				
TITLE		☐ DELETE	5.1 TITI	LE				☐ Change	☐ Addition
NAME		\	5.2 NA	ME					
STREET ADDRESS		\	5.3 \$77	REET	ADDRESS				
0774 07 747		\	54 CIT	Y-ST	i-ZIP	/			

CITY-ST-ZIP 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, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

DELETE

☐ Change

☐ Addition