SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P96000034808 (1)

FILED Aug 05 1997 8:00am Secretary of State

COSTA	A JANITORIAL SERVICES, INC	.		
Drington Diggs	n of Business	Mailing Address		
Principal Place		Mailing Address		
	AVE., LOT 235 REEK FL 33073	6800 NW 39 AVE., LOT 2 COCONUT CREEK FL 330		
			y. v	DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified 3a. Date of Last Report
		Ta		04/15/1996
	lace of Business	2a. Mailing Address	lilitary Tra	4. FEI Number Applied For Not Applied For
Suite, Apt.		26 304 5. 11 Suite, Apt. #, etc.	<u>Imary na</u>	Not Applica Social Status Posited Status Posited Status Posited Status Posited Status Posited Not Applicational Status Posited Status Posited Not Application
22	w, 010.	27		5. Certificate of Status Desired Fee Required
City & State	e .	City & State		6. Election Campaign Financing \$5.00 May Be
23 1 2001	field Beach FL	28 Doer-field	Brache	Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24 3344	10 26 454		30 USA	Personal Property Tax due June 30. Yes No
	9. Name and Address of Current I	Registered Agent	81 Name	10. Name and Address of New Registered Agent
	OLF, TODD		Name	
	00 NW 39 AVE., LOT 235 DCONUT CREEK FL 33073		83	ress (P.O. Box Number is Not Acceptable)
			84 TCity	· Frold Reach FL 85 30 College
11. Pursuant	to the provisions of Sections 607.0502 a	and 607.1508, Florida Statute	s, the above-named corp	poration submits this statement for the purpose of changing its register tion's board of directors. I hereby accept the appointment as registere
office or ri	egistered agent, or both, in the State of im familiar with, and accept the obligation	Florida. Such change was a ons of, Section 607,0505, Flo	uthorized by the corpora rida Statutes.	tion's board of directors. I hereby accept the appointment as registere
SIGNATURE	g			
	Signature, typod or printed name of registered agent e		: Registered Agent signature requi	
12.	OFFICERS AND I		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DELMEDIA, MAURICIO	DELETE	1.1 TITLE	☐ Change ☐ Addi
NAME	6800 NW 39 AVE., LOT 235		1,2 NAME	
STREET ADDRESS	COCONUT CREEK FL 33073		1.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	OCCUPATION CHILDREN VE GOOTS	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE	☐ Change ☐ Addi
NAME		(,) ()	2.2 NAME	·
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP			2. 4 CITY - \$7 - ZIP	
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STREET ADDRESS			3.3 STREET ADDRESS	
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NAME	·		4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
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TITLE		DELETE	5.1 TITLE	☐ Change ☐ Addi
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP		DELETE	5.4 CITY-ST-ZIP	☐ Change ☐ Addi
TITLE		ר"ו הנוניני	6.1 TITLE	Criange Addi
NAME STOCET ADDRESS			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
City-St-ZiP	by certify that the information supplied y	with this filing does not qualify	6.4 CITY-ST-Z/P	d 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.