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

PROFIT CORPORATION ANNUAL REPORT

1997

《《《如·多言·如《曹克·泰斯·马克·斯·马克·西斯·马德克·伊克·泰斯·马克·马克·马克·马克·马克·马克·斯斯克·马克·斯斯克·克克·克斯斯德·马克斯斯德·马斯德·马克·斯特·马克·克斯克·克克·

「一個」というので、一般のないのでは、100mmのでは、



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCU 1. Corporation	MENT # P 9	96000035169						
AMERICAN FLOOR MAINTENANCE, INC.								
· · · · · · · · · · · · · · · · · · ·								
Principal Plac	ce of Business	Mailing Add						
c/o STUART A. LIPSON, ESQ. 13899 BISCAYNE BLVD. # 404						♥ · *		
	MIAMI,	FL 33181				 Date Incorporated or Qualified 4/23/96 	3a. Date of Last	Report
2. Principal I	Place of Business	2a, Mailing	2a. Mailing Address			4. FEI Number	 	pplied For
21		26				65-0659070	¢0 7E and the second	
Suite, Apt	. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	· ·	Additional Required
City & Sta		27 City & S	tate			B. Election Campaign Financing		
23	ı		28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip	Country			Country		8. This corporation has liability for		-
24	25	29		30		Florida Statutes	Yes No	
	9. Name and Addre	ss of Current Registered Ag	ent			10. Name and Address of New F	legistered Agent	
FRAI	NCISCO J. V	ANEGAS		61	,	FRANCISCO J. VANE	GAS	
C/O 28 W. FLAGLER ST., SUITE 202					82 Street Address (P.O. Box Number is Not Acceptable)			
· · · · · · · · · · · · · · · · · · ·					-c/	o 13899 BISCAYNE B	LVD: #404	,
MIA	41, FL 3313	U					laal a	- X
		1		84	1	MIAMI	FL 85 Zig	Code 3181
11. Pursuant	to the provisions of Sect	ions 607.0502 and 607.1508	Florida Statute	s, the above	e-named	corporation submits this statement for the poration's board of directors. I hereby acc	purpose of changing	its registered
office or agent. I	registered agent, of opth am ramites with, and acc	n, in the State of Florida. Such Apparator obligations of Rection	charge was au 9 87.0505, Flor	umorized by ida Statute:	, the corp s.	poration's board of directors. Thereby acc	P. I	s regisiered
SIGNATURE	1						13/197	
		of registered agent and title if applicable	. (NOTE		ent signature	required when reinstating) ADDITIONS/CHANGES TO OFF	DATE !	100 INI 10
12.	1	FFICERS AND DIRECTORS	DELETE	13.	-	ADDITIONS/CHANGES TO OFF	Change	
TITLE	DPS	,		1.2 NAME		DPS	A	
NAME STREET ADDRESS	FRANCISCO J. VANEGAS			1.3 STREET	ADDRESS	FRANCISCO J. VANE	GAS	
	28 W. FLAGLER ST., SUITE 202		1.4 CITY-ST-ZIP		13899 BISCAYNE BLVD. #404			
CITY-ST-ZIP TITLE	MIAMI, FL		DELETE	21 TITLE	11-211	MIAMI, FL 33181	Change	Addition
NAME			_	22 NAME				
STREET ADDRESS				23 STREET	ADDRESS			
CITY-ST-ZIP				2 4 CITY-	ST-ZIP			
TITLE	 		DELETE	3.1 TITLE			Change	Addition
NAME				3.2 NAME				
STREET ADDRESS				3.3 STREET	ADDRESS			
CITY-ST-ZIP				3.4. CITY-	ST - ZIP			
TITLE			DELETE	4.1 TITLE			Change	Add:tion
NAME				4. 2 NAME				
STREET ADDRESS				4.3 STREET	ADDRESS			
CITY-ST-ZIP	<u> </u>			4.4 CITY - 5	7.70			
TITLE	1				1 - 219	· · · · · · · · · · · · · · · · · · ·	[] A.	
NAME	i		DELETE	5.1 TITLE	1 - 212	20000208	31722 ^{thange}	Addition
STREET ADDRESS			DELETE	5.2 NAME		20000208 -02/07/97010	31722 ^{26hange} 148032	Addition
			DELETE	5.2 NAME 5.3 STREET	r address	20000208 -02/07/97010 ***165.00	31722 ²⁶⁰⁰⁰⁰ 048032	Addition
CITY-ST-ZIP				5.2 NAME 5.3 STREET 5.4 CITY - S	r address	20000208 -02/07/97010 ***165.00		
			DELETE	5.2 NAME 5.3 STREET	r address	20000208 -02/07/97010 ***165.00	3 1	

14. I do 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 angular report or supplemental enrical report is to exemption 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block of chapter 607.

SIGNATURE:

305 147-3000

FILED

Feb 06 1997 8:00am

Secretary of State