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

PROFIT CORPORATION ANNUAL REPORT 1002



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Jan 30 1998 8:00am Secretary of State

	1330				or state
DOCUMENT # P96000035169 (7)				3	
AMERICAN FLOOR MAINTENANCE, INC.					
Drine in a l Diag	- of Divisionan	Mailian Addison			
Principal Plac		Mailing Address			
13899 BISCAYNE BLVD. 13899 BISCAYNE BLVD. SUITE 404					
MIAMI FL 33180 MIAMI FL 33180				DO NOT WRITE IN THI	S SPACE
				3. Date Incorporated or Qualified	
2. Principal P	lace of Business	2a. Mailing Address		04/23/1996 4. FEI Number	Applied For
21		26		65-0659070	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 27					Fee Required
City & Stat	e	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the o	
24	25	29	30	Personal Property Tax due June 30.	☐ Yes ☐ No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registere	d Agent
	NEGAS, FRANCISCO J		81 Name		
13899 BISCAYNE BLVD.			82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
SUITE 404 MIAMI FL 33180			83		
MIL	WH FE 33100				11-7-0-t
		1	84 City	F	
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 aboat the oppositions of Section Sect					
agent. I a	m familiar with, and absolut the control	ations of Section 697,0505, F	lorida Statutes.	ion's board of directors. The est accept the a	spolitiment as registered
SIGNATURE	Signature, typed or printed game of registered ag	ent sont tille if sonticable (NC	TE. Registered Agent signature require	ed when reinstating) DATE	
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	DPS	DELETE	1.1 TITLE		Change Addition
NAME	VANEGAS, FRANCISCO J		1.2 NAME		ļ
STREET ADDRESS	13899 BISCAYNE BLVD.		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	MIAMI FL 33180	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
NAME			2.2 NAME		C August I Logidon
STREET ADDRESS			2.3 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		DELETE	3.4, CITY - ST - ZIP 4.1 TITLE		Change Addition
NAME		—	4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP	<u> </u>	DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY - ST - ZIP			6.4 CITY-ST-ZIP		
i 14. I hereby o	certify that the information supplied w	with this filling does not afualify	for the exemption stated in :	Section 119.07(3)(i), Florida Statutes, I further	certify that the information

indicated on this annual report of supplement officer or director of the corporational the relationship to the relationship that the relat and accurate another my signature shall have the same legal effect as if made under oath; that I am an vered to expect this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE:

MENTURE REQUIRED