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 # P96000046899

HURRICANE POWER WASHING, INC.

Apr 02, 1999 8:00 am Secretary of State

04-02-1999 90019 020 ***150.00



Principal Place of Business Mailing Address					-	JE ria d ilat ibili	8 (81)8)811 1 881	
11954 68TH STREET NO 11954 68TH STREET NO								
WEST PALM BEACH FL 33412 WEST PALM BEACH FL 33412			3412	2				
•						DO NOT WRITE IN THIS SPACE		
1						3. Date Incorporated or Qualifed		Į.
	40.	l m. Abalifan Antonon				06/03/1996 4. FEI Number		pplied For
_	ace of Business	2a. Mailing Address				65-0668827		ot Applicable
21 Suite, Apt. i	# etc	Suite, Apt. #, etc.				03 0000021		Additional
22			٠ -	,		5. Certifcate of Status Desired		equired
		City & State	& State			6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution	Added	to Fees
Zip	Country Zip			Country		8. This corporation owes the current year Inte		_
24	25	29	30			Personal Property Tax.	Yes	□No
<u> </u>	9. Name and Address of Current	Registered Agent		Lat-		10. Name and Address of New Registered	Agent	
DEB	EZ. JAVIER G			81	Name			
11954 68TH STREET NO				82	Street Addre	ss (P.O. Box Number is Not Acceptable)		
WEST PALM BEACH FL 33412				83		<u> </u>		
	, , , , , , , , , , , , , , , , , , , ,			83				
				84	City	FL	85 Zip	Code
44 D.	# i-i f Continue 607 0503	and 607 1509 Elarida Statut	oo tho n		named corno	• —		registered
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 if applicable (NOTE	· Registered	t Acent s	signature required	when reinstation) DATE		
12.	OFFICERS AND		13.	, rigam c	arginatara raquilos	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	ORS IN 12
πιε	PSD	☐ DELETE	1.1 Ti	TLE			☐ Change	☐ Addition
NAME	PEREZ, JAVIER G		1.2 N	AME				
STREET ADDRESS	11954 68TH STREET NO		1.3 \$1	TREETA	ADDRESS			
CITY-ST-ZIP	WEST PALM BEACH FL 33412		1.4 CI	ITY-ST-	ŽIP			
TITLE	VD	☐ DELETE	2.1 70	TLE		•	Change	☐ Addition
NAME	PEREZ, CHRISTY R		2.2 N	AME				
STREET ADDRESS	11954 68TH STREET NO		2.3 51	TREETA	JODRESS			
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NAME			3.2 N	AME		·		}
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NAME			4.2N			•		
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NAME					ADDRESS	•	•	
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CITY-ST-ZIP	<u> </u>	DÉLETE	6.1 TI			·	Change	Addition
			6.2 N/			•		
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STREET ADDRESS	*		ł	ITY-ST-			•	
CITY-ST-ZIP	•		E 0.7 CI	01.				

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 receiter 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, of pn an attach nent with an address, with all other like empowered.

SIGNATURE:

E REQUIRED OF SIGNING OFFICER OR DIRECTOR