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May 06 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000053689 (1)

1. Corporation Name

CHRISTIAN BROTHERS CARPET CLEANING & PAINTING CO
MPANY, INC.

Principal Place of Business

#1107, 9000 NW 28TH DR.
CORAL SPRINGS FL 33065

Mailing Address

#1107, 9000 NW 28TH DR.
CORAL SPRINGS FL 33065



3. Date Incorporated or Qualified

06/24/1996

3a. Date of Last Report

2. Principal Place of Business

21 9000 NW 28th Dr.

2a. Mailing Address

26 9000 NW 28th Dr

4. FEI Number

650699083

Applied For

Not Applicable

Suite, Apt. #, etc.

22 1-107

Suite, Apt. #, etc.

27 1-107

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

23 Coral Springs

City & State

28 Coral Springs

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Zip

24 33065

Country

25 USA

Zip

29 33065

Country

30 USA

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

FILINGS, INC.
3732 NW 16 ST.
FT. LAUDERDALE FL 33311

10. Name and Address of New Registered Agent

81 Name

Amanda Deem

82 Street Address (P.O. Box Number is Not Acceptable)

9000 NW 28th Dr. 1-107

83

84 City

Coral Springs

FL

85 Zip Code

33065

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

Amanda J. Deem Amanda J. Deem treasurer

4-27-97

Signature, typed or printed name of registered agent, and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME DEEM, JOHN
STREET ADDRESS #1107, 9000 NW 28TH DR.
CITY-ST-ZIP CORAL SPRINGS FL 33065

TITLE D ☐ DELETE
NAME DEEM, AMANDA
STREET ADDRESS #1107, 9000 NW 28TH DR.
CITY-ST-ZIP CORAL SPRINGS FL 33065

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE:

Amanda J. Deem Amanda J. Deem

4-27-97 (954) 344-2058

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

06.18.0026

CR2E034 (9/96)