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PROFIT CORPORATION **ANNUAL REPORT**

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FLORIDA DEPARTMENT OF STATE

FILED

Apr 30 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUMENT # P96000057861 (2)

PROFESSIONAL OFFICE CLEANING SERVICES, INC. Principal Place of Business Mailing Address 7288 WOODMONT AVE. 7288 WOODMONT AVE. TAMARAC FL 33321 TAMARAC FL 33321 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>07/10</u>/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0628014 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ... Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 WALTERS, RONALD J 1170 N.W. 133RD TR 82 SUNRISE FL 33323 83 84 11. Pursuant to the provisions of Sections 607.0592 and 607.1508, Florida Statules, 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. Thereby accept the appointment as registered agent, and an amiliar with and accept the obligations of, Section 607.0505, Florida Statules.

SIGNATURE

Signature for the purpose of changing its registered agent and the Lappechie (NOIL: Begistered Agent signature required when reinstating) OFFICERS AND DIRECTORS CR2E034 (10/97 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change TITLE 1.1 TITLE SAYTH, ROBERT NAME 1.2 NAME 7288 WOODMONT AVENUE STREET ADDRESS 1.3 STREET ADDRESS TAMARAC FL 33321 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP Change DELETE Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP Change DELETE ☐ Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **63 STREET ADDRESS** 6.4 CITY-ST-ZIP 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 arrival 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 of trustee empoyered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if shanged, or on an address.