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FILED  
Apr 22 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 # P96000061831 (9)

1. Corporation Name

EXECUTIVE CLEANING ASSOCIATES, INC.



Principal Place of Business

20921 NE 13TH PLACE  
NO MIAMI BEACH FL 33179

Mailing Address

20921 NE 13TH PLACE  
NO MIAMI BEACH FL 33179-2010

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified  
07/24/1996

3a. Date of Last Report  
N/A

4. FEI Number

65-0682080

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☒

\$5.00 May Be  
Added to Fees

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

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

ADAMS, SHEARON N  
20921 NE 13TH PLACE  
NO MIAMI BEACH FL 33179

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provision 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, 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

Shearon Norman Adams

President

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D  
NAME NORMAN, SHEARON  
STREET ADDRESS 20921 NE 13TH PLACE  
CITY-ST-ZIP NO MIAMI BEACH FL 33179 ☐ DELETE

TITLE D  
NAME ADAMS, GEORGE G  
STREET ADDRESS 20921 NE 13TH PLACE  
CITY-ST-ZIP NO MIAMI BEACH FL 33179 ☐ DELETE

TITLE D  
NAME ADAMS, ARMEIN D  
STREET ADDRESS 20921 NE 13TH PLACE  
CITY-ST-ZIP NO MIAMI BEACH FL 33179 ☒ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.

1.1 TITLE P/T/D  
1.2 NAME SHEARON Norman - Adams  
1.3 STREET ADDRESS 20921 NE 13TH PL  
1.4 CITY-ST-ZIP North Miami Bch FL 33179 ☐ Change ☒ Addition

2.1 TITLE V/S/D  
2.2 NAME George G Adams  
2.3 STREET ADDRESS 20921 NE 13TH PL  
2.4 CITY-ST-ZIP No. Miami Bch FL 33179 ☐ Change ☒ Addition

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

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

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

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

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:

Shearon Norman Adams  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/31/97

305 651 8552

Daytime Phone #

0243008

CR2E034 (9/96)