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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

POCUMENT # P9600063529 (7)

BOTTOM LINE PROPERTY MAINTENANCE, INC.

Principal Place of Business Mailing Address 745 D HIGH POINT BLVD. NORTH 745 D HIGH POINT BLVD. NORTH DELRAY BEACH FL 33445 DELRAY BEACH FL 33445-3348 3. Date Incorporated or Qualified 3a. Date of Last Report 07/29/1996 2. Principal Place of Business Mailing Address 4 FEI Number Applied For 65-0685169 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State **\$5.00** May Be 6. Election Campaign Financing 23 Added to Fees 28 Trust Fund Contribution Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes X No 24 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WENZEL, GERARD A 745 D HIGH POINT BLVD. NORTH Street Address (P.O. Box Number is Not Acceptable) **DELRAY BEACH FL 33445** 83 Zip Code 3 1 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 hoard 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 Agent signature required when reinstating) 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition PD TITLE 1.1 1011 WENZEL, GARARD A NAME 1.2 NAME 745 D HIGH POINT BLVD. NORTH 1.3 STREET ADDRESS STREET ADDRESS **DELRAY BEACH FL 33445** CITY-ST-ZIP 1.4 CHY- \$1 - ZIP DELETE Change Addition 211HLE TITLE PERL, JERALD NAME 22 NAME 65 SW 26TH STREET 2.3 STREET ADDRESS STREET ADDRESS MIRAMAR FL 33023 2.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 3.1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Addition TITLE 4.1 TITLE Change NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST- ZIF Change TITLE DELETE ___ Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 DITY - \$1 - 7/P Change DELETE Addition TITLE 61 TITLE NAME 6.2 NAME

6.3 RTREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

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 is changed, or on an attay himent with an address.

(561) 276-4476

FILED

May 12 1997 8:00am

Secretary of State