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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000075070 (8)

M & T CLEANING SERVICES, INC.

FILED Feb 03 1998 8:00am Secretary of State

Principal Place of Business Mailing Address											TULL A BLUK L eas) 	
2948 SW 22ND CIR UNIT 5B 2948 SW 22ND CIR UNIT DELRAY BEACH FL 33445 DELRAY BEACH FL 33445							5B			DO NOT WRITE IN THIS SPACE			
										3. Date Incorporated or Qualified			
8. Principal Place of Duciness								· · · · · · · · · · · · · · · · · · ·		09/10/1996 4. FEI Number			
2. Principal Place of Business 2a. Mailing Address 21												- + -	oplied For of Applicable
26 Suite, Apt. #, etc. Suite, Apt. #, olc.										65-0694801			Additional
22			27						5. Certificate of Status Desired		*	equired	
City & Stat	te	City &	City & State					6. Election Campaign Financing		\$5.00	May Be		
23		28					,	Trust Fund Contribution		Added	to Fees,		
Zip		Country		Zip Cour 30			Jntry	ntry		8. This corporation owes or has pa	_		
							1			Personal Property Tax due June 10. Name and Address of New Re			No
9. Name and Address of Current Registered Agent										10. Name and Address of New Re	-gistered /	Agent	
FERRER, TERESA							81 Name					************	
2948 SW 22ND CIR., UNIT 5B							82	Street Address		ss (P.O. Box Number is Not Acceptal	ple)		
DELRAY BEACH FL 33445							83						
							<u></u>						
							84	City			FL	85 Zip (Code
office or I	registered ag	ent, or both, i	n the State of I	Florida, Suc		d by	the cor		ration submits this statement for the parties board of directors. I hereby acce				
SIGNATURE			D										
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent sig									beriupat s		DATE		
12.		OFF	ICERS AND D	IRECTORS	DELETE	13.				ADDITIONS/CHANGES TO OFFIC	CERS AND		
TITLE	D	TEDECA	PIT	10	L DELETE	1.1 1						Change	Addition
NAME FERRER, TERESA \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \							AME	ADDDDGGG					
) DELENIS DELONIES ANTIC								ADDRESS					
CITY-ST-ZIP TITLE	W.P	DEAUTI FL	33773		DELETE	2.1 Ti	ITY - S ITI F	1- LIF	 			Change	Addition
NAME	MURD	och: N	119UZL			2.2 N							
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CITY-ST-ZIP	DOLEAN	1 Bangh	PL	3344	گ۶	2.40	OTY-S	T-ZIP					
TITLE	1		T		DELETE	3.1 Ti	TLE					Change	Addition
NAME						3.2 N	AME						1
STREET ADDRESS						3.3 S	TREET	ADDRESS					
CITY-ST-ZIP								I - ZIP	<u> </u>				
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NAME						4. 2 N							
STREET ADDRESS								ADDRESS					
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NAME					☐ DELETE	5.1 TI 5.2 N						Ti cuante	<u> </u>
STREET ADDRESS								ADDRESS					
CITY-ST-ZIP						5.4 CI							
TITLE					DELETE	6.1 Tf		i- fit	 			Change	Addition
NAME						6.2 N/			1				
STREET ADDRESS								ADDRESS					
CITY-ST-ZIP							TY-\$1						

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 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.