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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000084837 (9)

**VEL-ZAP CLEANING SERVICES, INC.** 

Principal Place of Business

Mailing Address

## FILED Jan 29 1997 8:00am Secretary of State



2952 8W 174TH AVE. MIRAMAR FL 33029		2852 SW 174TH AVE. MIRAMAR FL 33029-5551						
					3. Date incorporated or Qualified 10/11/1996	<b>3a.</b> C	ate of Last F	Report
2. Principal P	Place of Business	2a. Mailing Address		4. FFI Number	()	A	pplied For	
21		26			65-0706 73	Not Applicable		
Suite, Apt. #, etc.		Suite, Apt #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & Stat	e e	City & State		6. Election Campaign Financing Trust Fund Contribution	ng <b>\$5.00</b> May Be Added to Fees			
Zip <b>24</b>	Country 25	Z (p 29	Coun 30	try	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
	9, Name and Address of Curr	ent Registered Agent			10. Name and Address of New Re	gistered	Agent	
	ez, dora		8	Name				
2952 SW 174TH AVE. MIRAMAR FL 33029				Street Add	et Address (P.O. Box Number is Not Acceptable)			
	· · · · · · · · · · · · · · · · · · ·		[8	3				
			8	4 City		FL	<b>85</b> Zip	Code
11. Pursuant office or r agent. I a	to the provisions of Sections 607.0 registered agent, or both, in the Sta im familiar with, and accept the obl	(402 and 607,1508, Florida S tite of Florida, Such change v ligations of, Section 607,050	itatutes, the aboves as authorized 5, Florida Statu	ove-named corborates.	rporation submits this statement for the p ation's board of directors. I hereby accep	urpose o	of changing i pointment as	ls registered registered
SIGNATURE	Signature, typed or printed name of registered :	aurnt and title if applicabile	(NOTE Benistered	Agent's opation rec	uired when reinstaling)	DATE		
12.		ND DIRECTORS	13,	gove a graduic req.	ADDITIONS/CHANGES TO OFFIC		D DIRECTO	RS IN 12
TITLE	D	DELETE	1.1 701	t			Change	Addition
NAME	VELEZ, DORA		1.2 NAM	E				
STREET ADDRESS	2952 SW 174TH AVE.		1.3 STR	£1 ADDRESS				
CITY-ST-ZIP	MIRAMAR FL 33029	n		- ST - ZIP				
TITLE	D	DELETE	2 1 1174			_	Change	Addition
NAME	ZAPATA, AMPARO		2.2 NAM	F		,		
STREET ADDRESS	2952 SW 174TH AVE.			ET ADDRESS				
CITY-ST-ZIP	MIRAMAR FL 33029	DELETE		/-SI-Z/P				
TITLE		L' DETETE		ì			☐ Change	Addition
NAME STREET ADDRESS			3.2 NAM	E1 ADDRESS				
CITY-ST-ZIP				7-\$1-7IP				
TITLE		DELETE					Change	Addition
NAME		-	4. 2 NAM					
STREET ADDRESS				E1 ADDRESS				
CITY-ST-ZIP			4.4 CIFY	- ST - ZIP				
TITLE		DELETE		+			☐ Change	Addition
'name			5.2 NAM	t				
STREET ADDRESS		,	5.3 STRE	E1 ADDRESS				
CITY-ST-ZIP				- \$1- 7/P				
TITLE		☐ DELETE	6.1 1(1)				Change	Addition
NAME			6.2 NAM	£				
STREET ADDRESS			6.3 STRE	ET ADDRESS				
CITY-ST-ZIP	•	•	6.4 CH Y	- S1 - 712				

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 trusted 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.

MONATURE ) POR UM