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 # P9600085464 (1)

FILED Apr 27 1998 8:00am Secretary of State

PABLO	TELEZ MAINTENANCE, IN	ic.			18/41
Principal Plac	e of Business	Mailing Address			LOINE BEELE ATSEN MITTE OF THE
1930 S.W. 44TH TERRACE 1930 S.W. 44TH TERRACE FT LAUDERDALE FL 33317 FT LAUDERDALE FL 33317				OO NOT WRITE IN TH	IS SPACE
				3. Date Incorporated or Qualified	
				10/14/1996	
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 Suite, Apt #, etc.		Suite, Apt. #, etc.		65-0710421	Not Applicable
22 Jane, Apr. W. 616.		27 Suile, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State		City & State		6, Election Campaign Financing	\$5.00 May Be
23	-	28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25		30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Register	ed Agent
TELLEZ, PABLO			61 Name		
1930 S.W. 44TH TERRACE			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
FT LAUDERDALE FL 33317					
			83		
			84 City		85 Zip Code
				F	' L '
11. Pursuant	to the provisions of Sections 607.05 registered agent, or both, in the State	02 and 607.1508, Florida Statutes e of Florida. Such change was au	s, the above-named cor thorized by the corpora	poration submits this statement for the purposation's board of directors. I hereby accept the a	e of changing its registered
agent. I a	m familiar with, and accept the oblig	ations of, Section 607.0505, Flor	ida Statutes.		,ppsmm.orx ac r-granas
SIGNATURE					
12.	Signature, typno or printed name of registeriid as	NO DIRECTORS (NOTE	Registered Agent signature requ	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D OFFICERS AF	DELETE	1.1 TITLE	ADDITIONS/OFFAINGES TO OFFICE IS F	Change Addition
NAME	TELEZ, PABLO		1.2 NAME		
STREET ADDRESS	1930 S.W. 44TH TERRACE		1.3 STREET ADDRESS		
CITY-\$1-ZIP	FT. LAUDERADLE FL 33317		1.4 CITY-ST-ZIP		
TITLE		☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME			2.2 NAME		\
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY - ST-ZIP	$(x_{i_1}, \dots, x_{i_m}) \in \mathcal{C}_{i_m}$	
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		İ
CITY-ST-ZIP			3.4. 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	· · · · · · · · · · · · · · · · · · ·	
TITLE		☐ DELETE	5.1 TITLE		Change L Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		Phire	5.4 CITY - ST - ZIP	<u> </u>	[
TALE		DELETE	61 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME)
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	and the the internation of the	with this films does not a self. 4	6.4 CITY-ST-ZIP	Contine 110 07/0V) Florida Statidas 14 mbs.	antifuthat the information
14. Inereby (certify that the information supplied y	vim mis tiling does not qualify for	THE exemption stated if	Section 119.07(3)(i), Florida Statutes. I further	certify that the information

4. Thereby 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 you an attachment with an address.

SIGNATURE:

KREQUIEN/954) 7417531 4

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