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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS **FILED** 

May 08 1998 8:00am

Secretary of State

## DOCUMENT # 1. Corporation Name P96000090296 (0)

NATIONAL CLEANING SYSTEMS, INC. Principal Place of Business Mailing Address 3571 NE 19 AVENUE PO BOX 9562 FT LAUDERDALE FL 33308 FT LAUDERDALE FL 33310 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/04/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 65-0704676 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible 24 Yes Yes 25 30 Personal Property Tax due June 30. 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ALVAREZ, GASTON R JOAO BORGES Street Address (P.O. Box Number is Not Acceptable) 2701 LE JEUNE ROAD 82 SUITE 407 83 CORAL GABLES FL 33134 Zip Code 11. Pursuant to the provisions of Soctions 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 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. LANDERDALE SIGNATURE (NOTE: Rogistered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change \_\_\_ Addition TITLE 1.1 TITLE BORGES, JOAO M NAME 1.2 NAME **3571 NE 19 AVENUE** STREET ADDRESS 1.3 STREET ADDRESS FT LAUDERDALE FL CITY - ST- ZIP 1.4 CITY - ST - ZIP DS DELETE 2.1 TITLE ☐ Change Addition TITLE MARTINS, LUISA M NAME 2.2 NAME **3571 NE 19 AVENUE** STREET ADDRESS 2.3 STREET ADDRESS FT LAUDERDALE FL CITY-ST-ZIP 2 4 CITY - ST - ZIF DELETE Change . Addition TITLE 3.1 TITLE BORGES, RUI L NAME 3.2 NAME 3571 N.E. 19 AVENUE 33308 197 DUKES ST. STREET ADDRESS 3.3 STREET ADDRESS **KEARNEY NJ 07032** CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE ☐ Change Addition TITLE 51 THLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5 4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 62 NAME STREET ADDRESS **63 STREET ADDRESS** 6.4 City - St - ZiP CITY-ST-ZIP

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 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, A on an attachment with an address.

11/20/60