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

PROFIT CORPORATION ANNUAL REPORT:

1997

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

Apr 22 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000096687 (4)

R D P COMMERCIAL CLEANING CONTRACTORS. INC.

Principal Place of Business Mailing Address 3438 EAST LAKE ROAD 3438 EAST LAKE ROAD **SUITE 14-625 SUITE 14-625** PALM HARBOR FL 34685 PALM HAR8OR FL 34685-2400 3. Date Incorporated or Qualified 3a. Date of Last Report 11/27/1996 2. Principal Piace of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 8. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zio Country Zip Country This corporation has liability for intangible tax under s. 199.032. 24 25 29 30 Yes No Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name FAIR. ANDREA M ESQ. 35111 U.S. HIGHWAY 19 NORTH Street Address (P.O. Box Number is Not Acceptable) **SUITE 302** PALM HARBOR FL 34684 83 **B4** City Zip Code 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 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. SIGNATURE Signature typic or printed name of registered agent and title If applicable (NOTE: Registered Agent a gnature required when reinstating) OFFICERS AND DIRECTORS 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 101.6 1.1 TITLE Change Addition ALESSANDRELLI, LUCIA B 1.2 NAME 239 WOOD LAKE WYNDE STREET ADDRESS 1.3 STREET ADDRESS **OLDSMAR FL 34677** CITY - S1 - ZIP 1.4 CHTY-ST-ZIP DELETE 101: F 2.1 TITLE Change Addition GIRUI, MARISA NAME 2.2 NAME 239 WOOD LAKE WYNDE STREET ANOBESS 2.3 STREET ADDRESS **OLDSMAR FL 34677** CITY - S1 - ZIE 2. 4 City-St-ZiP DELETE THE ☐ Addition 31 TITLE HAZTE 3.2 NAME STREET ADORESS **3.3 STREET ADDRESS** CHY-ST-ZIP 34 CITY-ST-ZIP DELETE THE 4.1 TITLE Change Addition DAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CH1Y - ST - 20F 44 CITY-ST-ZIP DELETE TITLE 51 TITLE Addition 5.2 NAME SURREL ADORESS **5.3 STREET ADDRESS** City-ST-ZIP 54 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Change 100002153051 -04/24/97--01006--022 NAMÉ 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** ***165.00

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 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. M. Deva B. Alessaudielli Pres. 4-11-97 (813) 541-055

6.4 CITY-ST-ZIP