## 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 # P96000103920 (0)

ULTRABRIGHT JANITORIAL SERVICES, INC.

Principal Place of Business Mailing Address 1914 MARSEILLE DRIVE 1914 MARSEILLE DRIVE APT 2 MIAMI BEACH FL 33141 MIAMI BEACH FL 33141-3431 3. Date Incorporated or Qualified 3a. Date of Last Report 12/30/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 650728667 26 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Žip Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes TV No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent 81 NANDELSTADT, STEPHAN C 1914 MARSEILLE DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) APT 2 83 MIAMI BEACH FL 33141 84 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, typod or printed name of registered agont and title if applicable. (NOTE: Bog sterod Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. (96/6) 13. DELETE Change Addition TITLE 1.1 TITLE NANDELSTADT, STEPHAN C NAME 1.2 NAME 1914 MARSEILLE DRIVE, APT 2 STREET ADDRESS 1.3 STREET ADDRESS MIAMI BEACH FL 33141 CITY-ST-ZIP 1.4 C/1Y - ST - ZIP DELETE Change Addition TITLE 2171111 NAME 2.2 NAM STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - \$1 - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34. CITY-S1-ZIP DELETE Change Addition TITLE 4.1 THLE 4.3 \$1REE1 ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - \$1 - ZIP DELETÉ Change Addition TITLE 5.130116 NAME **5.2 NAME** STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE G.1 TITLE NAME 6.2 NAME

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 logal effect as if made under oath; that I am an officer or director of the corporation or the receiver or truster empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 3 if changed, or on an attachment with an address.

63 STREET ADDRESS

CIGNATURE: ALL WORKS

STREET ADDRESS

CITY-ST-ZIP

FILED May 13 1997 8:00am Secretary of State



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