

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

FILED
May 15 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000001106 (8)

1. Corporation Name
PROFESSIONAL CLEANING SYSTEMS INC.



Principal Place of Business
800 W. MALLORY ST #B
PENSACOLA FL 32501

Mailing Address
800 W. MALLORY ST #B
PENSACOLA FL 32501

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Out of Home, Work in Restaurants 22 Suite, Apt. #, etc. #180 23 City & State Pensacola, FL 24 Zip 32501 25 Country U.S.		2a. Mailing Address 26 4301 Creighton Rd 27 Suite, Apt. #, etc. #180 28 City & State Pensacola, FL 29 Zip 32501 30 Country U.S.		3. Date Incorporated or Qualified 01/06/1997	
				4. FEI Number 59-3430501	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent WILLIAMS, JASON R 800 W. MALLORY ST #B PENSACOLA FL 32501				10. Name and Address of New Registered Agent	
				81 Name Jason R. Williams	
				82 Street Address (P.O. Box Number is Not Acceptable) 4301 Creighton Rd #180	
				83	
				84 City Pensacola FL 85 Zip Code 32504	

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	Same as above	<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Owner	<input type="checkbox"/> DELETE
NAME	Jason R. Williams	
STREET ADDRESS	4301 Creighton Rd #180	
CITY-ST-ZIP	Pensacola, FL 32504	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Owner	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Jason R. Williams	
1.3 STREET ADDRESS	4301 Creighton Rd #180	
1.4 CITY-ST-ZIP	Pensacola, FL 32504	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 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 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.

SIGNATURE
Jason R. Williams
Jason R. Williams
1/15/98 (850) 444-2907

CR2E034 (10/97)