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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P97000004045**1. Corporation Name

TIM'S KEEP IT CLEAN INC.

Principal F	lace of	Business	
5044 1914		DENO DO!	

FILED May 04, 1999 8:00 am Secretary of State

05-04-1999 90103 009 ***150.00



)
Principal Place	of Business	Ma	ailing Address							
5011 VILLAGE (GARDENS DRIVE	501	11 VILLAGE GARDENS (DRIVE			\			
SARASOTA FL 34234			SARASOTA FL 34234			DO NOT WRITE IN THIS SPACE				
		•					3. Date Incorporated or Qualifed		0,702	 -
							01/09/1997			
- a : : : I : : : : : : : : : : : : : : :	· · · · · · · · · · · · · · · · · · ·	120	Maiting Address				4. FEI Number			Applied For
 1	ace of Business	<u> </u>	Mailing Address				65-0717967			Not Applicable
1	# -1-	26	Suite Ant # etc				03-07 17907			Additional
Suite, Apt.	#, etc.	\vdash	Suite, Apt. #, etc.				5. Certifcate of Status Desired		T -	Required
City & State		27	City & State		_		6 Floation Compoign Figureing			0 May Be
City & State	-		Only a chare				Election Campaign Financing Trust Fund Contribution			d to Fees
7in	Country	28	Zip	Cor	ıntrv		8. This corporation owes the curr	ont vear inte		
Zip ⊓		29	Lip	30	,		Personal Property Tax.	on year me	Yes	□No
4	9. Name and Address of Current		tered Agent	1301	Τ		10. Name and Address of New f	Registered /	Agent	
	3. Name and Address of Current	regio	noiva Agein		81	Name			<u> </u>	
PINT	ZOW, HERMAN									
	NO LOCKWOOD RIDGE ROAD	LOT 1	98		82	Street Add	ress (P.O. Box Number is Not Accepta	able)		
	ASOTA FL 34234-6540		-		83					
· · · · ·										
	•				84	City	•	FL	85 Zi	o Code
			107 4500 Ft 11- Ct-14	45			poration submits this statement for the ion's board of directors. I hereby accept		hanging i	ts registered
agent. I a	n familiar with, and accept the obligat	ions of	, Section 607.0505, Fig	onda Stat	utes		ed when reinstating)	DATE	-4-	
12.	OFFICERS AN			13.			ADDITIONS/CHANGES TO OF	FICERS AN	D DIREC	TORS IN 12
TITLE	PTD		☐ DELETE	1.1 TI	TLE				☐ Chang	
NAME	TAYLOR, TIM			1.2 N	AME					
STREET ADDRESS	5011 VILLAGE GARDEN DR			1.3 5	TREET	ADDRESS				
CITY-ST-ZIP	SARASOTA FL 34234			1.4 C	ITY-S	T-ZIP				
TITLE	SDRS		☐ DELETE	2.1 TI					☐ Chang	e Addition
NAME	GUMIENNY, ROBERT J.			2.2 N	AME					
STREET ADDRESS	5011 VILLAGE GARDEN DR.					ADDRESS				-
	SARASOTA FL 34234				ITY-S					}
CITY-ST-ZIP TITLE	TTD		☐ DELETE	3.1 Ti		11-21			☐ Chang	B Addition
NAME .	PINTZOW, HERMAN		-	3.2 N		1				Ì
STREET ADDRESS	3223 N. LOCKWOOD RG RD, #	¥198				TADDRESS				
CITY-ST-ZIP	SARASOTA FL 34234				CITY-S					
TITLÉ	V. 18 100 11 1 1 0 01201		☐ DELETE	4,1 TI					Chang	e
NAME				4.21						j
STREET ADDRESS				438	TREET	TADDRESS				·
					ITY-S					. [
CITY-ST-ZIP TITLE			☐ DELETE	5.1 T			· · · · · · · · · · · · · · · · · · ·		Chang	e Addition
NAME			<u> </u>	5.2 N		.			-	
STREET ADDRESS				5.3 S	TREET	TADORESS				J
					ITY-S					
CITY-ST-ZIP TITLE			☐ DELETE	6.1 T					☐ Chang	e
NAME			_	6.2 N	AME				_ •	
						TADDRESS				ļ
STREET ADDRESS					ITY-S					ļ

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, with all other like empowered.

(941) 727-5225