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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000020841 (7)

XPERT CLEANING & REMODELING CO., INC.

FILED Apr 27 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				r transfer tie teter bitter aten aten aten baue men atest bite bien iste intr	
4201 N FEDERAL HWY 4201 N FEDERAL HWY			•••		
POMPANO BEACH FL 33064		POMPANO BEACH FL 33	POMPANO BEACH FL 33064		DO NOT WRITE IN THIS SPACE
Ì					3. Date Incorporated or Qualified
					03/03/1997
2. Principal Place of Business		2s. Mailing Address			4. FEI Number Applied For
21 26					Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc. I		5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State		City & State	City & State		
23		28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution ☐ Added to Fees
Zip	Country	Zip	Country		B. This corporation owes or has paid the current year Intangible
24	25	29 3	0		Personal Property Tax due June 30. Yes No
	g. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registered Agent
DAVID R. ROY, P.A. 4201 N FEDERAL HWY			81	Name	
			82	Street Ac	ddress (P.O. Box Number is Not Acceptable)
P	OMPANO BEACH FL 33064				
			83		
			84	City	FL 85 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 1 am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.					
SIGNATURE Signalure, typed or printed name of registered agent and talk ill applicable (NOTE Registered Agent signature required when reinstating) DATE					
12.	OFFICERS AN	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PVST	☐ DELETE	1,1 TITLE	Į.	Change Addition
NAME	MAIURO, JOSEPH K		1.2 NAME	ľ	
STREET ADORESS	2631 NE 48TH ST		1.3 STREET		
CITY-ST-ZIP	LIGHTHOUSE POINT FL 3:	DELETE	1.4 CITY-S 2.1 TITLE	T-ZIP	☐ Change ☐ Addition
NAME			22 NAME	i	C. Change C. Auditott
STREET ADDRESS			2.3 STREET	annoree }	
CITY-ST-ZIP			2.4 CITY-S		
TITLE	DELETE		3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET	ADDRESS	
CITY-ST-ZIP			3.4. CITY-S		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET	ADDRESS	
CITY-ST-ZIP			4.4 CITY - ST	r-ZIP	
TITLE	· ·	DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			53 STREET		
CITY-ST-ZIP		T NO CTC	5.4 CITY-S	r-zip	
TITLE		☐ DELETE	6.1 TIFLE	}	☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS		/	6.3 STREET		
CITY-ST-ZIP			64 CITY-S	T-ZIP	15- 0- 8- 440 07(0)/2 Classes 0)-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1

I hereby certify that the information supplied with this filing closs 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 suppliemental annual popul 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 director of the corporation or the receiver or director of the corporation of the receiver or director of the corporation of the receiver of the receiver of the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver of the receiver of the corporation of the receiver of the receiver of the receiver of the corporation of the receiver of the receiver of the corporation of the receiver of the receiver of the corporation of the receiver of the receiver

SIGNATURE:

4120198

954-782-4900