## 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 # P97000029246 (0)

UNITED STATES MAINTENANCE, INC.

Principal Place of Business	Mailing Address				
1834 MAIN ST	1834 MAIN ST				
SARASOTA FL 34236	SARASOTA FL 34236				

## **FILED** Mar 25 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						C SOUTHARD SITE FEITH CEDIT BOTH BOTH BOTH BOTH BOTH BIND STATE BOTH STATE BIND FOR BIND FOR BOTH BOTH BOTH BOTH BOTH BOTH BOTH BOTH						
1834 MAIN ST 1834 MAIN ST												
SARASOTA F				RASOTA FL 34236							5405	
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									rporated or Qualified			
			·	4 100 4.1.1.				03/31/				
2. Principal P	lace of Busin	ness	— — ·	Mailing Address				4. FÉI Numb	<sup>er</sup> 44805			pplied For
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Sulte, Apt.	#, etc.		<b>├</b> ─	Suite, Apt. #, etc.				5. Certificate	of Status Desired			Additional
22			27	27. 0.01.1					<del></del>			equired
City & State			<del></del>	City & State					ampaign Financing			May Be
23		Country	28	7:	7 0-				d Contribution	<u> </u>		to Fees
Zip		Country		<b>Z</b> ip	$\vdash$	untry			oration owes or has p	_	- ' -	tangible   ☐ No
24	6 Name	25 and Address of C	29	rad Agent	30	1			Property Tax due Jurk  d Address of New Re			110
^ -			ullelit negiste	ou Agent		B1	Nam	<del> </del>	u Audibee Oi Nett III	gietorou A	gent	
		<u>,</u> alexander g				"	Mair	9				
	34 MAIN S					82	Stree	t Address (P.O. Box No	umber is Not Accepta	ble)		
,,SA	rasota f	L 34236										
						83	•					
						84	City				<b>85</b> Zip	Code
						1 .	•			FL	'	j
11. Pursuant	to the provis	ions of Sections 60	7.0502 and 607	1508, Florida Statu	ites, the a	bove	-name	d corporation submits	this statement for the	purpose of	changing i	ts registered
agent. I a	registered aç ım <b>fam</b> iliar w	jent, or both, in the ith, and accept the	obligations of,	section 607.0505, F	lorida Sta	tutes	ine co S.	orporation's board of di	ectors. I nereby acce	pi ina appo	ilitilitietit as	registered
SIGNATURE			_									
JIGHATORE	Signature, lyped	or printed name of registe	red agent and title if	sopticable (NO	TE: Registere	ed Age	nt signati	ire required when reinstating)		DATE		
12.		OFFICER	S AND DIRECT		13.			ADDITIONS	S/CHANGES TO OFFI		_	
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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 regain of 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 example of the corporation of the corporation of the corporation of the regain of 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 example of the corporation of t ont with an address.