## 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 # P97000036875 (7)

**REAL CLEANING SERVICES INC.** 

## FILED Apr 27 1998 8:00am Secretary of State



| Dring along 1 Disc  | - 70  |   |                     |                |   |
|---|---|---|---------------------|----------------|---|
| Principal Place of Business Mailing Address   |   |   |                     |                |   |
| 5800 W 14TH COURT 5800 W 14TH COURT   |   |   |                     |                |   |
| HIALEAH FL 33012  |   | HIALEAH FL 33012                        |                     |                | DO NOT WRITE IN THIS SPACE  |
|   |   |   |                     |                | 3. Date Incorporated or Qualified   |
|   |   |   |                     |                | 04/24/1997  |
| 2. Principal Place of Business  |   | 2a. Mailing Address                     |                     |                | 4 EEI Number  |
| 21  |   | 26                                      |                     |                | Applied For Not Applied For Not Applied For                                       |
| Suite, Apt. #, etc.   |   | Suite, Apt. #, etc.                     | Suite, Apt. #, etc. |                | SR 75 Additional  |
| 22  |   | 27                                      |                     |                | 5. Certificate of Status Desired Fee Required                                     |
| City & State  |   | City & State                            |                     |                | 6. Election Campaign Financing \$5.00 May Be                                      |
| 23  |   | 28                                      | 28                  |                | Trust Fund Contribution Added to Fees   |
| Zip   | Country   | Zip                                     | Country             |                | 8. This corporation owes or has paid the current year Intangible                  |
| 24  | 25  | 29 3                                    | 0                   |                | Personal Properly Tax due June 30.  Yes No  |
|   | 9. Name and Address of Curre                      | ant Registered Agent                    |                     |                | 10. Name and Address of New Registered Agent                                      |
| R   | Odriguez, ramfis                                  |   | 81                  | l Name         |   |
| 5800 W 14TH COURT   |   |   | 82                  | Street         | Address (P.O. Box Number is Not Acceptable)                                       |
| HIALEAH FL 33012  |   |   | oz Sileet Ad        |                | Address (r.d. box Number is Not Acceptable)                                       |
|   |   |   | 83                  | 3              |   |
|   |   |   |                     |                |   |
|   |   |   | 84                  | City           | FL 85 Zip Code  |
| 11. Pursuant  | to the provisions of Sections 607.05              | 02 and 607.1508, Florida Statutes       | , the abov          | re-named       | cornoration 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   |   |   |                     |                |   |
| SIGNATORE   | Signature, typed or printed name of registered as | gent and title if applicable (NOTE: F   | logistored Ag       | jent signature | required when reinstating) DATE   |
| 12.   |   | ND DIRECTORS                            | 13.                 |                | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12                                 |
| TITLE   |   |   | 1.1 TITLE           |                | Change Addition   |
| NAME  | RODRIGUEZ, RAMFIS                                 |   | 1.2 NAME            | i              |   |
| STREET ADDRESS  | 5800 W 14TH COURT                                 |   | 1.3 STREE           | T ADDRESS      |   |
| CITY-ST-ZIP   |   |   | 1.4 DITY-           | ST - ZIP       |   |
| TITLE   | VD  | ☐ DELETE                                | 2.1 TITLE           |                | Change Addition   |
| NAME  | RIQUELME, MARIO                                   |   | 2.2 NAME            |                |   |
| STREET ADDRESS  | 8203 NW 188 TR                                    |   | 2.3 STREE           | T ADDRESS      |   |
| CITY-ST-ZIP   | MIAMI FL 33015                                    |   | 2. 4 CITY-          | ST-ZIP         |   |
| TITLE   |   | DELET <b>E</b>                          | 3.1 TITLE           |                | Change Addition   |
| NAME  |   |   | 3.2 NAME            |                | ·   |
| STREET ADDRESS  |   | J                                       | 3.3 STREE           | T ADDRESS      |   |
| CITY-ST-ZIP   |   |   | 3.4 CITY-           | ST · ZIP       |   |
| TITLE   | DELETE 4.1  |   | 4.1 TITLE           |                | Change Addition   |
| NAME  |   | 1                                       | 4. NAME             |                |   |
| STREET ADDRESS  |   | 1                                       | 4.3 STREET          | ADDRESS        |   |
| C(TY-ST-ZIP   |   | 1                                       |                     | S1 - ZIP       |   |
| TITLE   |   | DELETE                                  | 5.1 HTLE            |                | Change Addition   |
| NAME  |   | 1                                       | 52 NAME             | ĺ              |   |
| STREET ADDRESS  |   | ,                                       | 53STREET            | ADDRESS        |   |
| CITY-ST-ZIP   |   | 1                                       | 5.4 CITY - S        | - 1            | į   |
| TITLE   |   | DELETE                                  | 6. TITLE            |                | Change Addition   |
| NAME  |   |   | 6. NAME             |                | - Change - Change   |
| STREET ADDRESS  |   |   |                     | ADDRESS        |   |
| CITY-ST-ZIP   |   |   | 6 CITY-S            | - 1            |   |
|   | ertify that the information supplied              | with this filing does not qualify for t | he kemp             | tion stated    | in Section 119.07(3)(i), Florida Statutes. I further certify that the information |

Indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath, 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 organization with an address.