Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90016 040 \*\*\*150.00

## 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 # P97000037791

1. Corporation Name

MAJEST	Y JANITUHIAL SERVICES CC	mr.							
Dringing Place	of Business	Mailing Address				-			
Principal Place of Business Mailing Address  7825 W 36 AVE, UNIT 104  7825 W 36 AVE, UNIT 104									
HIALEAH FL 30018~									
							DO NOT WRITE IN	THIS SPACE	
							Date Incorporated or Qualifed 04/25/1997		
2. Principal Pl	ace of Business	2a. Mailing Address		,			FEI Number		Applied For
7991	W. 31st. CT.	26 7991 W. 31st	. Ct				65-0750369	<del></del>	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5.	Certificate of Status Desired		5 Additional
22		27				<u> </u>			Required
City & State Hiale	eah, Fl.	City & State  28 Hialeah, Fl.				6.	Election Campaign Financing Trust Fund Contribution		May Be d to Fees
7:_	Country	Zip	Coun				This corporation owes the current ye	ar Intangible	
3.50-	18-3852 <mark>25</mark> Miami-Dad€	29 33018 - 3852 36	o] M	liami-	Dade		Personal Property Tax.	Yes	□No
	9. Name and Address of Current	Registered Agent				10.	Name and Address of New Registe	ered Agent	
CAN	TANA URBADEDTO ID			81 Name					
SANTANA, HUMBERTO JR					Addre	ss (P	.O. Box Number is Not Acceptable)		
-7825 W 36 AVE; UNIT-104				79	91 W		31st. Ct.		
HIALEAH FL 33018				83					
			1	84 City.	alea	h.		FL 85 2i	p Code 5018-3852
11. Pursuant	to the provisions of Sections 607.0502	and 607,1508, Florida Statutes	, the ab	ove-namer	corno	ration	submits this statement for the purpo-	se of changing	its registered
office or re	egistered agent, or both, in the State of manifer from the state of manifer with, and accept the obligation	f Florida. Such change was auth	nonzed	by the corp	oration	's bo	pard of directors. I hereby accept the	appointment as	registered
•	in familiar with, and accept the obligation	715 OI, COCHOIT 507.5000, 1 IONG	a olalo						
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable (NOTE: Ri	egistered A	Agent signature	required y	when re	einstating) DA	TE	
12.	OFFICERS AND		13.	·		1	ADDITIONS/CHANGES TO OFFICER		
TITLE	PD	☐ DELETE	1.1 T/TL	Æ				Chang	ge
NAME (	Santana, Humberto Jr		1.2 NAM	<b>/IE</b>					
STREET ADDRESS	7825 W 36 AVE, UNIT 104		1.3 STF	REET ADDRESS	i				
CITY-ST-ZIP	HIALEAH FL 33018		1.4 CIT	Y-ST-ZiP					
TITLE	DELETE		2.1 TITL	2.1 TITLE				Chang	ge 🗌 Addition
NAME	SANTANA, HUMBERTO		2.2 NAM	ME				*	
STREET ADDRESS	7991 W 31.CT		2.3 STR	REET ADDRESS	;				
CITY-ST-ZIP	HIALEAH FL 33016			Y-ST-ZIP					Addition
TITLE	<del>STD</del> -	DELETE	3.1 TITL					☐ Chang	ge 🗌 Addition
NAME	SANTANA, LUCIANA		3.2 NAM		ł		•		
STREET ADDRESS	7001 W-31 CT		3.3 STF	REET ADDRESS	3				
CITY-ST-ZIP	HIALEAH FL 33016		_	Y-ST-ZIP	<del> </del>			Chang	no Addition
TITLE		☐ DELETE	4.1 TITL					Chang	ge Addition
NAME			4, 2 NA						
STREET ADDRESS			1	REET ADDRESS	•				
CITY-ST-ZIP				Y-ST-ZIP	-			☐ Chang	e
TITLE		☐ DELETE	5 1 TITL	.E	1			☐ cuang	le Naninou

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.

5 3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

NAME

Humbento Santana- President

DELETE

01-18-99

☐ Addition

Daytime Phone #