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

CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Feb 11 1998 8:00am Secretary of State

P97000038142 (0) DOCUMENT # LEPEKHA JANITORIAL INC. Principal Place of Business Mailing Address 535 SOUTH CREEK DRIVE OSPREY FL 33229 535 SOUTH CREEK DRIVE OSPREY FL 33229 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 04/28/1997 Applied For 2. Principal Place of Business 2a. Mailing Address Not Applicable 59-3441540 21 26 Suite, Apt #, etc. \$8.75 Additional Suite, Apt #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible ☐ Yes 24 30 Personal Property Tax due June 30. 25 29 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name LEPEKHA, SERGUEI 535 SOUTH CREEK DRIVE Street Address (P.O. Box Number is Not Acceptable) OSPREY FL 33229 83 85 Zip Code 84 City 11. Pursuant to the provisions of Soctions 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. v CEPERHO Jan 02 - 98 STROVE Signature, typing or purited harne of requirered agent and title if apple able Registered Agent signature reg ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE 1.1 TITLE Change Addition TITLE President 1.2 NAME NAME Serguei Lepekha STREET ADDRESS 1.3 STREET ADDRESS 535 South Creek Drive 1.4 CITY-ST-ZIP CITY-ST-ZIP Osprey, Florida 33229 DELETE Change Addition TITLE 2 1 TITLE NAME 2.2 NAME STREET ADDRESS 23 STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4 1 Tilt F TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME **5 3 STREET ADDRESS** STREET ADDRESS 5 4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP

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 in address.

SIGNATURE:

Serguei Lepekha Jan. 02 - 1998