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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED

99 JUN - 2 PM 2: 05

SECRETARY OF STATE TALLAHASSEE. FLORIDA

DOCUMENT # p97000039560

Ricardo Pressure Cleaning of Naples, Inc.

Principal Place of Business

1. Corporation Name

Mailing Address

7590 Wingedfoot Drive Fort Myers, Florida 339

Fort Myers, Florida 33912			DO NOT WRITE IN THIS SPACE	
•			3. Date Incorporated or Qualifed May 1, 1997	
Principal Place of Business     1	2a. Mailing Addr	ess	4. FEI Number 65–0753774	Applied For Not Applicable
Suite Apt #, etc	Suite, Apt #,	etc	5. Certificate of Status Desired <b>K</b>	\$3.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country 25	Zip   <b>29</b> _	Country	This corporation owes the current year     Personal Property Tax	r Intangil le ———————————————————————————————————
9. Name and Address of Current Registered Agent Valverde, Wagner 7590 Wingedfoot Drive Fort Myers, Florida 33912		81 Name 82 Street 83 84 City	82 Street Address (P.O. Box Number is Not Acceptable) 83	

1. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of charging its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE n - DAH Standard typed or present name of registered agent and line if applicable (NOTE: Registere L'Avent signature regarded when reinstatus). 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE [ ] Change [ ] Addition TITLE President 1.1.1(TLE Chacon, Ricardo 1.2 NAME NAME 7590 Wingedfoot Drive STREET ADDRESS 1.3 STREET ADDRESS Fort Myers, Florida 33912 CITY-ST-Z.P 14 CHY-ST-ZIF CI DELETE TITLE 21 TITLE [ | Addition NAME 22 NAVE STREET ADDRESS 2.3 STREET ADDRESS 2 4 CHY-\$1-ZIF E I DELETE  $TI^{\uparrow} \cup E$ 3.1 TITLE [ |Addion NAME 3.2 NAMS STREET ADDRESS 33 STREET ADORESS 34 OTY-\$1-ZP CITY-ST-ZIP [] DELETE TITLE 4.1 TiT. F [ Change [ ] Addition NAME 4.2 NAME 100002892641----4.3 STREET ADDRESS STREET ADDRESS 4.4 CiTy-\$1-2i2 \*\*\*\*558.75 \*\*\*\*558.75 OTY-SI-ZP [ ] DELETE 5 1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS 54 CITY-ST-ZIF 61 TITLE TITLE DELETE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CiTY-ST-ZiP CITY-\$1-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 o..th; 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.

SIGNATURE

MONATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytor Phone #

Date

CR2E034 (11/98)