PROFIT CORPORATION ANNUAL REPORT

1998

Sandra B. Mortheyn, 🖰 🗢

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P 1. Corporation Name MUINO CLEANING, INC. P97000046147 (9)

FILED Feb 26 1998 8:00am Secretary of State

	OLLANING, INO.								
Principal Place	e of Business	Ma	iling Address			1 samescher inn ranst um nis matte datter d		A ALIMA IIAM MII	Bit 1881 1881
			217 W 70TH TERRACI	E		·			
HIALEAH FL 33018 HIALEAH FL 33018						DO NOT WRITE IN THIS SPACE			
}						3. Date Incorporated or Qualified	IIV IIII 3	FACE	
						05/23/1997			
2. Principal P	ace of Business	20.	Mailing Address	-		4. FEI Number		ΠΔ,	pplied For
21	100 01 p. 000 1000	26	Trialling / Total 2002			65-07 63 364			ot Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			· · · · · · · · · · · · · · · · · ·			Additional
22		27]			5. Certificate of Status Desired		,	equired
City & State	,		City & State			6. Election Campaign Financing		\$5.00	May Be
23		28				Trust Fund Contribution			to Fees
Zıp	Country]	Zip	Country	,	8. This corporation owes or has pa	aid the curr	ent year Int	tangible
24	25	29		30		Personal Property Tax due June			No .
ļ <u></u>	9. Name and Address of Curre	nt Regist	ered Agent	81		10. Name and Address of New Ri	gistered A	igent	
	RNANDEZ, RICHARD M			8"	Name				
	077 BISCAYNE BLVD			82	Street Add	ress (P.O. Box Number is Not Accepta	ble)		
PENTHOUSE SUITE									
MIAMI FL 33161				63					
*				84	City			85 Zip	Code
			74500 50 11 50				FL	11	
Office or re	to the provisions of Sections 607.051 egistered agent, or both, in the State	D2 and 60 e of Florid	7.1508, Florida Stati a. Such change was	ites, the above authorized by	e-named corp the corpora	poration submits this statement for the tion's board of directors. I hereby acce	purpose of of the appo	changing it pintment as	ts registered
4 agent la	m familiar with, and accept the oblig	gations of,	Section 607.0505, F	Iorida Statutes	3.	•			Ĭ
SIGNATURE	Signature, typod or printed name of registered ag	* *							
12.	OFFICERS AN			13.	ent signature requi	ired when reinstating) ADDITIONS/CHANGES TO OFFI	DATE CERS AND	DIRECTOR	9S IN 12
TITLE	D	12.12.11.12	☐ DELETE	1.1 TITLE		ALSO TION OF IT MADE TO OFFI	OLINO MIND	Change	Addition
NAME	MUINO, ANTONIO		—	1.2 NAME					
STREET ADDRESS	3217 W 70TH TERR			1.3 STREET	ADDRESS				
CITY-ST-ZIP	HIALEAH FL 3318			1.4 CITY-S					
TITLE			DELETE	2.1 TITLE	1.51			Change	Addition
NAME				2.2 NAME					
STREET ADDRESS				2 3 STREET	ADORESS				
City-St-ZiP				2. 4 CITY-5					
TITLE			DELETE	3.1 TITLE		· · · · · · · · · · · · · · · · · · ·		Change	Addition
NAME				3.2 NAME					
STREET ADDRESS				3.3 STREET	ADDRESS				
CITY-ST-ZIP				3.4. C(TY - 5	ST-ZIP				
TITLE			DELETE	4.1 TITLE				Change	Addition
NAME				4. 2 NAME					
STREET ADDRESS				4.3 STREET	ADDRESS				}
CITY-ST-ZIP				4.4 CITY-S	T-ZIP				
TITLE			DELETE	5 1 TITLE				Change	Addition
NAME				5.2 NAME					
STREET ADDRESS				5.3 STREET	ADORESS				
CITY-ST-ZIP				5.4 CITY-S	1-ZIP				İ
TITLE			DELETE	6.1 TITLE				Change	☐ Addition
NAME				6.2 NAME					
STREET ADDRESS				6.3 STREET	ADDRESS				
CITY-ST-ZIP				6.4 CITY-S					
	and the short short short and an according to	alieta en las Ell	ing does not muntify			Section 110 07/31/i) Florida Statutes	further co	difu that the	information

I hereby certify that the information supplied with this filling does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report is ruped to execute 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.