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

PROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000053055 (4)

MAID FOR YOU ENTERPRISES INC.

Principal Place of Business Mailing Address

FILED Mar 19 1998 8:00am Secretary of State



1017 PENINSULA AVE. 1017 PENINSULA AVE. TARPON SPRINGS FL 34689 TARPON SPRINGS FL 34689 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/11/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59 -3450759 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be \Box 23 28 Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible Yes 24 29 Personal Property Tax due June 30. 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BRISBOIS, PHILLIP G 1017 PENINSULA AVE 82 Street Address (P.O. Box Number is Not Acceptable) **TARPON SPRINGS FL 34689** 63 84 City Zip Code 11. Pursuant to the provisions of Sections 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. 7.58C.F 3/13/98 SIGNATURE name of registered agent and bits if applicable (NOTE Registered Agont signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 11 TITLE Change Addition BRISBOIS, PHILLIP G NAME 12 NAME 1017 PENINSULA AVE. STREET ADDRESS 1.3 STREET ADDRESS **TARPON SPRINGS FL 34689** CITY-ST-ZIP 14 C/TY - ST - Z/P DELETE 21 TITLE Change Addition TITLE BRISBOIS, CAROL A NAME 2.2 NAME 1017 PENINSULA AVE. STREET ADDRESS 23 STREET ADDRESS **TARPON SPRINGS FL 34689** 2 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition Change TITLE 31 TITLE NAME 3 2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY-ST-ZIP DELETE ☐ Addition Change 41 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 51 DITE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADORESS CITY-ST-7IP 6.4 CITY-ST-ZIP

14. 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 suppliemental 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 altechment with an address.

SIGNATURE:

3/13/98

813-185-0502