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FILED

Apr 14 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000056714 (3)

1. Corporation Name

AMERICAN EXTERIOR CLEANING, CORP.



Principal Place of Business

3317 RUE DE LAFITTE
TALLAHASSEE FL 32312

Mailing Address

~~3317 RUE DE LAFITTE~~
~~TALLAHASSEE FL 32312~~
P.O. BOX 3768
TALLAHASSEE

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/27/1997

4. FEI Number

59-3455083

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 P.O. BOX 3768

27 Suite, Apt. #, etc.

28 City & State

29 TALLAHASSEE, FL

Zip

30 32315

Country

LISA

9. Name and Address of Current Registered Agent

WILSON, KATHY
3317 RUE DE LAFITTE
TALLAHASSEE FL 32312

10. Name and Address of New Registered Agent

81 Name

LEWIS B. WILSON III

82 Street Address (P.O. Box Number is Not Applicable)

3317 RUE DE LAFITTE

83

84 City

TALLAHASSEE

FL

85 Zip Code

32312

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

[Signature]
Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME ☐ DELETE

VICE PRESIDENT
LEW WILSON
3317 RUE DE LAFITTE
TALLAHASSEE, FL 32312

TITLE NAME ☐ DELETE

VICE PRESIDENT
KATHY WILSON
3317 RUE DE LAFITTE
TALLAHASSEE, FL 32312

TITLE NAME ☐ DELETE

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME ☐ DELETE

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME ☐ DELETE

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME ☐ DELETE

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME ☐ DELETE

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☒ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

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.

SIGNATURE

[Signature]

LEW WILSON

4-8-98

850-385-8653

CR2E034 (10/97)