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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham "

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # P97000059015 (2)

IMMACULATE CLEANING ENTERPRISE INC.

FILED Jun 22 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					1 10011981 110 10111 18811 08111 8911	i abisi abibi bisib ibisi batbi	14001 0141 1981	
6413 COUNTRY FAIR CIRCLE 6413 COUNTRY FAIR CIRC								
BOYNTON BEACH FL 33437 BOYNTON BEACH FL 334			137		DO NOT WR	DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifie	ed		
					07/03/1997		ŀ	
2. Principal Place of Business 2a. Molling Address					4. FEI Number		Applied For	
21					65-0768		Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired	7	Additional	
22					& Election Compaign Francisco		Required	
28					6. Election Campaign Financing Trust Fund Contribution		May Be	
Zip	Country Zip		Country		This corporation owes or has paid the current year Intangible			
24			30				□No	
	9. Name and Address of Curren	t Registered Agent		2T	10. Name and Address of New	Registered Agent		
MARTINE, DEBRA				1 Name				
6413 COUNTRY FAIR CIRCLE			8	2 Street Ad	Address (P.O. Box Number is Not Acceptable)			
BOYNTON BEACH FL 33437			8	9				
			8	4 City		FL 85 Zip	p Code	
11. Pursuant	to the provisings of Sections 607,050	2 and 607.1508, Florida Statut	tes, the abo	ve-named co	orporation submits this statement for th	e purpose of changing	its registered	
office or r	registered ago/it, or both, in the State, im familia, with and accopt the body.	Of Florida, Such change was a mons of Section 607,0505, Ft	authorized orida Statut	by the corpores	orporation submits this statement for the ration's board of directors. If hereby according to the results of the results are the results of t	cept the appointment a	as registered	
SIGNATURE	- VI/VI/IA ~ 1 1/8	anial -			6	:/4/98		
Stigrature typical or prantist name of registers, Lagent and their applicable (NOTL Blog				gent signature rec	guired when reinstating)	MATE		
12.	OFFICE HS AND DIRECTORS		13.	·	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
NAME	Delson many me / president		1.1 1/11.0			☐ Change	Addition S	
STREET ADDRESS	6413 covery FAM circle		1.2 NAM				135	
CITY-ST-ZIP	Debra marine/president GY13 cowerry Kain circle Boynton Bch. A 33437		- 1.4 CITY	FT ADDRESS			Addition C	
TITLE	DELETE 21TI		2 1 71746			Change	Addition C	
NAME			2.2 NAM	E				
STREET ADDRESS			23 STREET ADDRESS					
CITY-ST-ZIP			2 4 CITY	2 4 CITY-ST-ZIP				
TITLE	DELFTE 31 TI					☐ Change	Addition	
NAME			3.2 NAM				ŀ	
STREET ADDRESS	•			FT ADDRESS			1	
CITY-SI-ZIP TITLE			3.4. CITY					
NAME			4.1 TITLE	1		L. Cylange	Addition	
STREET ADDRESS	ORESS		4. 2 NAM	ET ADDRESS		11	/./.	
CITY-ST-ZIP	1		4.4 CITY			7/1)	$\mathcal{O}(\mathcal{A})$	
TITLE		DELETE 5.1.TI				Change	Addition	
NAME			52 NAMI					
STREET ADORESS	,			ET ADDRESS			ļ	
CITY-ST-ZIP			5.4 CITY					
TITLE		DELETE	6.1 TrILE		Ever bush seams among strings seams are	Change	Addition	
NAME		6.2		:	500002 57 -9 6 /23/38- 910	<u>a kulkulkuttu</u> a man oom	l	
STREET ADDRESS	638		6.3 STRE	I ADDRESS	****15(i,(ii)	30411 B US	ĺ	
CHY-ST-ZIP	sortify that the information curvalied with			ST-ZIP	n Section 110 07/200 Florida Destrata	17		

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 withe 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 additional statutes.