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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

Jan 28 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

STREET ADDRESS

CITY-ST-ZIP

P97000090778 (6)

TOP TO BOTTOM PRESSURE CLEANING, INC.

Principal Place of Business Mailing Address 9840 N.W. 52 PLACE 9640 N.W. 52 PLACE CORAL SPRINGS FL 33076 **CORAL SPRINGS FL 33076** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/20/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0785994 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Ζip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CLAIRE, WILLIAM F 81 Name 9640 N.W. 52 PLACE Street Address (P.O. Box Number is Not Acceptable) **CORAL SPRINGS FL 33076** 83 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent a stitile if applicative (NOTI Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.170106 Change ☐ Addition CLAIRE, WILLIAM F NAME CR2E034 1.2 NAME 9640 N.W. 52 PLACE STREET ADDRESS 1.3 STREET ADDRESS **CORAL SPRINGS FL 33076** CITY-ST-ZIP 14 CITY-S1-ZIP TITLE DELETE Addition 2 1 1HTLF NAME VETERE-CAHILL MARY 2.2 NAME ( Name change) Claire, Mary 9640 N.W. 52 PLACE STREET ADDRESS 23 STREET ADDRESS **CORAL SPRINGS FL 33076** CITY-ST-ZIP 2. 4 C(1Y - ST - Z(P -MINISPERS PAR DELETE ☐ Change TITLE 3.1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE Change Addition 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 THUE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - \$1 - ZIP DELETE TITLE 6.1 TITLE Addition NAME 6.2 NAME

14. Thereby 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 chapted, or on an attachment with an address.

63 STREET ADDRESS

64 CITY-ST-ZIP