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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700092488

1. Corporation Name

STEAM-AWAY CARPET CLEANERS OF FLORIDA, INC.

Principal Place of Business								
2160 BOARDMAN RD.								
DADTON EL 22020								

FILED Feb 20, 1999 8:00 am Secretary of State

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Principal Place	e of Business	•	Mailing Address		•			
2160 BOARDMAN RD. BARTOW FL 33830		2160 Boardman RD. Bartow FL 33830	2160 BOARDMAN RD. BARTOW FL 33830		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed			ı
					10/27/1997			l
3 0	Land Bridge	2a. Mailing Address			4. FEI Number		Applied For	l
-	lace of Business	——————————————————————————————————————					ot Applicable	l
21{			Suite Apt # etc		59-3477310		Additional	1
Suite, Apt. #, etc.			Suite, Apt. #, etc.		5. Certifcate of Status Desired	Fee Required		
22		City & State	City & State		6 Flatin Compiler Financia			ــند
City & State .		⊢ , '	⊢ , ′		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
23		Zip	Zip Country		This corporation owes the current year in		10.000	l
Zip Country		— · –	⊢		Personal Property Tax.	Marigible Marigible	□No	l
24	25		101		10. Name and Address of New Registered			İ
	9. Name and Address of Curr	ent Registered Agent		81 Name	17. Name and Address of New Augustina			ł
ROY	ER, MICHAEL			1,144,116	<u> </u>			ļ
2160 BOARDMAN RD.				82 Street Addr	ess (P.O. Box Number is Not Acceptable)			ĺ
	TOW FL 33830							ĺ
DAR	1011 FL 33030			83	, <u>;</u>		ļ	l
				84 City	FL	85 Zip	Code	
							to vociotorod	ł
 office or re 	to the provisions of Sections 607.09 egistered agent, or both, in the Stat m familiar with, and accept the oblic	e of Florida. Such change was aut	norizea	by the corporation	oration submits this statement for the purpose of on's board of directors. I hereby accept the appo	intment as i	registered	
SIGNATURE					, , , , , , , , , , , , , , , , , , ,			١ _
	Signature, typed or printed name of registered a	<u> </u>		Agent signature require	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECT	ORS IN 12	ő
12.		ND DIRECTORS 13.		,	ADDITIONS/CHANGES TO OTT IDENO A	Change		7
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NAME	BOYER, MICHAEL	1.2 N		1				E03/
STREET ADDRESS	2160 BOARDMAN RD.	1.3 ST		REET ADDRESS				Ä
CITY-ST-ZIP	BARTOW FL 33830			TY-ST-ZIP	<u> </u>		Addition	٥
TITLE	V	☐ DELETE	☐ DELETE 2.1 TR			☐ Change	Addition	`
NAME	Boyer, Karen	2.2		ME				
STREET ADDRESS	2160 BOARDMAN RD.		2.3 \$T	REET ADDRESS				
CITY-ST-ZIP	BARTOW FL 33830		2, 4 Cl	TY-ST-ZIP	<u> </u>			
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CITY-ST-ZIP			4.1 TI			☐ Change	Addition	l
NAME	_		4.2 N					-
				REET ADDRESS				
STREET ADDRESS	₹							
CITY-ST-ZIP				TY-ST-ZIP	<u> </u>	☐ Change	e ☐ Addition	1
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STREET ADDRESS			5.3 STREET ADDRESS					1
CITY-ST-ZIP						[7] Chara	e	1
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NAME		•	6.2 NA					
STREET ADDRESS		·	6.3 \$1	REET ADDRESS				١.
CITY-ST-ZIP			6.4 CI	TY-ST-ZIP]

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, with all other like empowered.