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 # **P97000097719**1. Corporation Name

FERNANDO'S CLEANING SERVICE CORP.

Principal Place of Business								
10302 CHADBOURNE DR. TAMPA FL 33624								

Mailing Address

10302 CHADBOURNE DR. TAMPA FL 33624

FILED Mar 11, 1999 8:00 am Secretary of State 03-11-1999 90105 007 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

11/14/1997

2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number		App	lied For		
21		26			59-3480098		Not	Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	•		5. Certifcate of Status Desire	d 🗆	\$8.75 A			
22		27					Fee Rec	uired		
City & State City & State				6. Election Campaign Financ	ing 🗆	\$5.00 1				
23		28			Trust Fund Contribution	_	Added to	Fees		
Zip	Country Zip Cour			itry	8. This corporation owes the	· · · · · ·		_/		
24	25	29	30		Personal Property Tax.			200		
Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent										
				81 Name ()						
ROJAS, CARLOS H				82 Street Address (P.Q.Box Number is Not Acceptable)						
10302 CHADBOURNE DR.				10.302 Cherelouse & Dr						
TAM	TAMPA FL 33624				83					
							1::=: 6			
				84 City Curry FL 85 Zip Goden 3 Sec. 4						
10 CONTROL - 1 CON										
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 607.0506, Florida Statutes.										
	Bodlass	Ink /		-		2/5/99				
SIGNATURE	Signature, typed or printed name of registered agent	/ '/' \	TE Registered	Agent signature re	equired when reinstating)	DATE				
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO	OFFICERS AND I	DIRECTOR	RS IN 12		
TITLE	Р	☐ DELETE	1.1 TIT	.E	V	Ü	Change	☐ Addition		
NAME	ROJAS, CARLOS H		1.2 NA	vie				í		
STREET ADDRESS	10302 CHADBOURNE DR.		1.3 ST	REET ADDRESS						
CITY-ST-ZIP			Y-ST-ZIP				ľ			
TITLE	V	☐ DELETE	2.1 (1)	-			Change	Addition		
NAME	HENRY, ANA M	_	2.2 NA	uF .		-				
Į				REET ADDRESS						
STREET ADDRESS				1						
CITY-ST-ZIP	TAMPA FL 33624	DELETE		Y+ST-ZIP			Change	Addition		
TITLE	S -	□ bereie	3.1 TT				_ change			
NAME	LOPEZ, ALBA I		3.2 NA							
STREET ADDRESS	10302 CHADBOURNE DR.		3.3 ST	REET ADDRESS						
CITY-ST-ZIP	TAMPA FL 33624			Y-ST-ZIP	N7 - c 'A - ET	·	7.01	770		
TITLE		☐ DELETE	4.1 TIT	LE	President] Change	Addition		
NAME			4. 2 NA	ME	BALBALA Parely			ļ		
STREET ADDRESS			4.3 ST	REET ADDRESS	10302 Charloume Dr			Į		
CITY-ST-ZIP			4.4 CIT	Y-ST-ZIP	BAKBAKA Parky 10302 Charloume Dr Tungur FL 33624					
TITLE		☐ DELETE	5.1 TIT				_ Change	Addition		
NAME			5.2 NA	ME						
STREET ADDRESS			5.3 STI	REET ADDRESS						
CITY-ST-ZIP			5.4 CIT	Y-ST-ZIP						
TITLE		☐ DELETE	6.1 TIT	LE			Change	☐ Addition		
NAME			6.2 NA	ME				ļ		
i			6.3 STI	REET ADDRESS				ł		
STREET ADDRESS				Y-ST-ZIP				Í		
CITY_ST_ZIP			= U-VII		i					

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, if on an attachment with an address, with all other like empowered.

SIGNATURE: