## 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 # P97000100875

AMERICAN CARPET CLEANING SYSTEMS, INC.

	IN CARLET CLEANING OF				
Principal Place	of Business	Mailing Address			,
3501 SE 16TH (		3501 SE 16TH PLACE			
CAPE CORAL FL 33904 CAPE CORAL FL 33904			DO NOT WRITE IN	THIS SPACE	
0.0 2 00					7110 61 7102
				3. Date Incorporated or Qualifed	İ
	_			11/24/1997	Applied For
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Not Applicable
21		26		65-0801327	\$8.75 Additional
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	Fee Required
22		27			\$5.00 May Be
City & State	е	City & State		6. Election Campaign Financing	Added to Fees
23		28		Trust Fund Contribution	
Zip	Country	Zip	Country	8. This corporation owes the current ye	Yes No
24	25		30	Personal Property Tax.  10. Name and Address of New Regist	
	9. Name and Address of Curre	nt Registered Agent	nal Name	10. Name and Address of New Regist	Sicu Ago
	101BLE 500		81 Name		
COOK, JOHN F ESQ.		82 Street Add	fress (P.O. Box Number is Not Acceptable)	-	
	S. ORANGE AVE.	•		22 1 2 2 2 2 1 1 2 2 1 1 1 1 2 2 1 1 1 1 2 2 1 1 1 1 1 2	34 1828 \$4 12 26 131 (4.17 (4.18 1828) 1828
SAR	ASOTA FL 34236		83		
			84 City		85 Zip Code
			1 1	poration submits this statement for the purportion's board of directors. I hereby accept the	FL 00 25 300
agent. I a	Signature, typed or printed name of registered a	gent and title if applicable. (NOTE:	Registered Agent signature requir		ATE .
12.	OFFICERS A	ND DIRECTORS	13.		RS AND DIRECTORS IN 12
TITLE	P				RS AND DIRECTORS IN 12
NAME	Behm, Jr Kenneth R	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12  Change Addition
STREET ADDRESS					
I SIRPELADURESS	ACON OF ACTUA DUACE		1.1 TITLE		
	ACON OF ACTUA DUACE		1.1 TITLE 1.2 NAME		☐ Change ☐ Addition
CITY-ST-ZIP	3501 SE 16TH PLACE		1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS		
CITY-ST-ZIP	3501 SE 16TH PLACE	□ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME	3501 SE 16TH PLACE CAPE CORAL FL 33904	□ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE		☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	3501 SE 16TH PLACE CAPE CORAL FL 33904	□ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY- ST-ZIP 2.1 TITLE 2.2 NAME		☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	3501 SE 16TH PLACE CAPE CORAL FL 33904	□ DELETE	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		☐ Change ☐ Addition
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CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	3501 SE 16TH PLACE CAPE CORAL FL 33904	☐ DELETE	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		☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	3501 SE 16TH PLACE CAPE CORAL FL 33904	☐ DELETE	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		Change Addition  Change Addition  Change Addition
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CITY-ST-ZIP TITLE NAME STREET ADDRESS	3501 SE 16TH PLACE CAPE CORAL FL 33904	☐ DELETE	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 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE: 3

STREET ADDRESS

**FILED** 

Feb 15, 1999 8:00am

**Secretary of State** 

02-15-1999 90037 011 \*\*\*150.00