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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

P97000101481 (4)

MARY LOU JUSTICE CLEANING SERVICES. INC.

Principal Place of Business

Mailing Address

1017 HALL ST

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-SE-ZIP

1017 HALL-RT

FILED

98 JUN -5 PM 4: 00

SECRETARY OF STATE TALLAHASSEE, FLORIDA



CLEADWATER FL 34616	CLEARWATER FL 3461	8	DO NOT WRITE IN THI 3. Date Incorporated or Qualified 12/01/1997	S SPACE
2. Principal Place of Busine 21 /5409 /55	ss	1St STEAST	12/01/1997. 4. FEI Number	Applied For Not Applicable
Suite, Apt. #, etc.	Suite, Apt #, etc. 27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City State 23 / A) CTRA Z	BEACH FL 28/1/ADE/R/	4 BEACH FC	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24 33 708 2	5 PINE//AS 29 33708	30 PINELLAS	This corporation owes or has paid the operation of the personal Property Tax due June 30.	Yes No
9, Name a	nd Address of Current Registered Agent		10. Name and Address of New Registers	d Agent
SHAW, WILLIAM	M B JR.	81 Name		
18395 GULF BI INDIAN SHORE		82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
		83		
		84 City	F	L 85 Zip Code
office or registered age:	ns of Sections 607.0502 and 607.1508, Florida Stati nt, or both, in the State of Florida. Such change was , and accept the obligations of, Section 607.0505, F	authorized by the corporate	oration submits this statement for the purpose ion's board of directors. I hereby accept the a	of changing its registered ppointment as registered
SIGNATURE Electric broad or	printed came of registers diagons and title diapplicable (NC	PIL: Registered Agent signature require	ed when reinstation DATE	
12.	OFFICERS AND DIRECTORS	I 13.	ADDITIONS/CHANGES TO OFFICERS A	
	ONT / DIRECTOR DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME MARY		1.2 NAME		
	IST CT GAST	1.3 ŞTREET ADDRESS		
CITY-ST-ZIP	IST GAST A 33708		400002552	7447
TITLE	DELETE	21 TITLE	-06/03/38	Addition
NAME		2.2 NAME	****150.00	****150.00
STREET ADDRESS		2 3 STREET ADDRESS		
CITY-ST-ZIP		2. 4 CITY-ST-ZIP		
TITLE	DELETE	31 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY - ST - ZIP		
TITLE	DELETE	417016		Change Addition

CITY-ST-ZIP 6.4 CITY - 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.

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

61 TITLE

6 2 NAME

DELETE.

☐ DELETE

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5 4 CITY-ST-ZIP

4.4 CITY - ST - ZIP

Change

☐ Change

Addition

Addition