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FILED
Apr 29 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000102756 (8)

1. Corporation Name

SAFEGUARD STEAMPRESSURE CLEANING, INC.



Principal Place of Business

Mailing Address

3116 E. BUSINESS HWY. 98
PANAMA CITY FL 32401

3116 E. BUSINESS HWY. 98
PANAMA CITY FL 32401

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/05/1997

2. Principal Place of Business

21 3116 E. Business Hwy 98

Suite, Apt. #, etc.

22

City & State

23 PANAMA City, FL.

Zip

24 32401

Country

25 Bay

2a. Mailing Address

26 3116 E. Business Hwy 98

Suite, Apt. #, etc.

27

City & State

28 PANAMA City, FL.

Zip

29 32401

Country

30 Bay

4. FEI Number

59-3480862

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

OWENS, DENNIS
3116 E. BUSINESS HWY. 98
PANAMA CITY FL 32401

10. Name and Address of New Registered Agent

81 Name Christopher M. Owens

82 Street Address (P.O. Box Number is Not Acceptable)
3116 E. Business Hwy 98

83

84 City PANAMA

FL

85 Zip Code 32401

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

Christopher M. Owens

President

4-22-98

Signature, name, or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PT ☒ DELETE

NAME OWENS, DENNIS
STREET ADDRESS 3116 E. BUSINESS HWY. 98
CITY-ST-ZIP PANAMA CITY FL 32401

TITLE V ☒ DELETE

NAME OWENS, CHRIS
STREET ADDRESS 3116 E. BUSINESS HWY. 98
CITY-ST-ZIP PANAMA CITY FL 32401

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President ☒ Change ☐ Addition

1.2 NAME Christopher M. Owens
1.3 STREET ADDRESS 3116 E. Business Hwy 98
1.4 CITY-ST-ZIP PANAMA City, FL 32401

2.1 TITLE Vice President ☒ Change ☐ Addition

2.2 NAME Dennis Owens
2.3 STREET ADDRESS 3116 E. Business Hwy 98
2.4 CITY-ST-ZIP PANAMA City, FL 32401

3.1 TITLE Secretary ☐ Change ☒ Addition

3.2 NAME Robin Owens
3.3 STREET ADDRESS 3116 E. Bus. Hwy 98
3.4 CITY-ST-ZIP PANAMA City, FL 32401

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
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.

SIGNATURE *Christopher M. Owens* 4-22-98

CR2E034 (10/97)